



**PATIENT**

Monkey Cooley

**PRESENTING CLINICAL SIGNS**

Seen chewing on string; owner suspected needle was swallowed. Difficult to tell where it is on radiographs.

Abnormal PE/Chem/CBC/UA Results: String found coming out of rectum while prepping patient for scan. Nothing under tongue/in mouth.

**SPECIES**

Feline

**COMPUTED TOMOGRAPHIC STUDY OF THE THORACIC SPINE**

Plain study available for review.

**BREED**

DSH

**COMPUTED TOMOGRAPHIC FINDINGS**

A linear metal attenuating foreign body compatible with a needle can be seen exiting the thoracic esophagus level with the heart base to the right side pointing cranially. The foreign body appears to pass the right lung dorsally and the thoracic vertebrae T5 and T6 ventrally to exit the thoracic cavity between the 6<sup>th</sup> and 7<sup>th</sup> right ribs. The tip of the needle points to the caudal margin of the right shoulder blade. Total length of the needle is 6 cm. The needle appears to pass the aorta ventrally and cranially without injuring it. However, this cannot be definitively ascertained as to the presence of multiple beam hardening streak artifacts. I cannot see a string attached to the needle, but this may be soft tissue attenuating and effacing with the surroundings. The abdomen is not fully included.

**SEX**

MN

**AGE**

3 Years

There is no evidence of pulmonary injury, pneumothorax, tracheal, or mediastinal injury.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Penetrating long metal foreign object within the mid thoracic esophagus exiting the thoracic cavity between the 6<sup>th</sup> and 7<sup>th</sup> right ribs.
- No evidence of concurrent pulmonary injury.
- No overt regional hemorrhage seen.
- No string attached to the needle seen.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The tip of the needle has exited the thoracic cavity between the 6<sup>th</sup> and 7<sup>th</sup> right ribs within the most dorsal aspect of the intercostal space and points towards the caudal margin of the right shoulder blade. The hind end of the needle appears to be situated within the esophagus. Esophageal, vascular, and pulmonary injury are a potential however no direct signs of which are seen on the CT study at this point. A soft tissue attenuating string being attached to the needle cannot be ruled out entirely, but none are seen directly.

**REFERRING VET**

Dr. J. Shapera

**INVOICE**

53596

**DATE**

8-20-22



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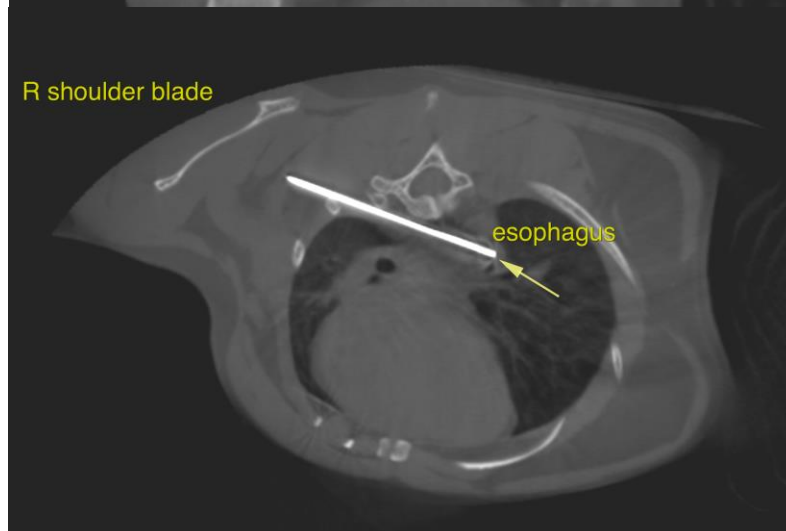
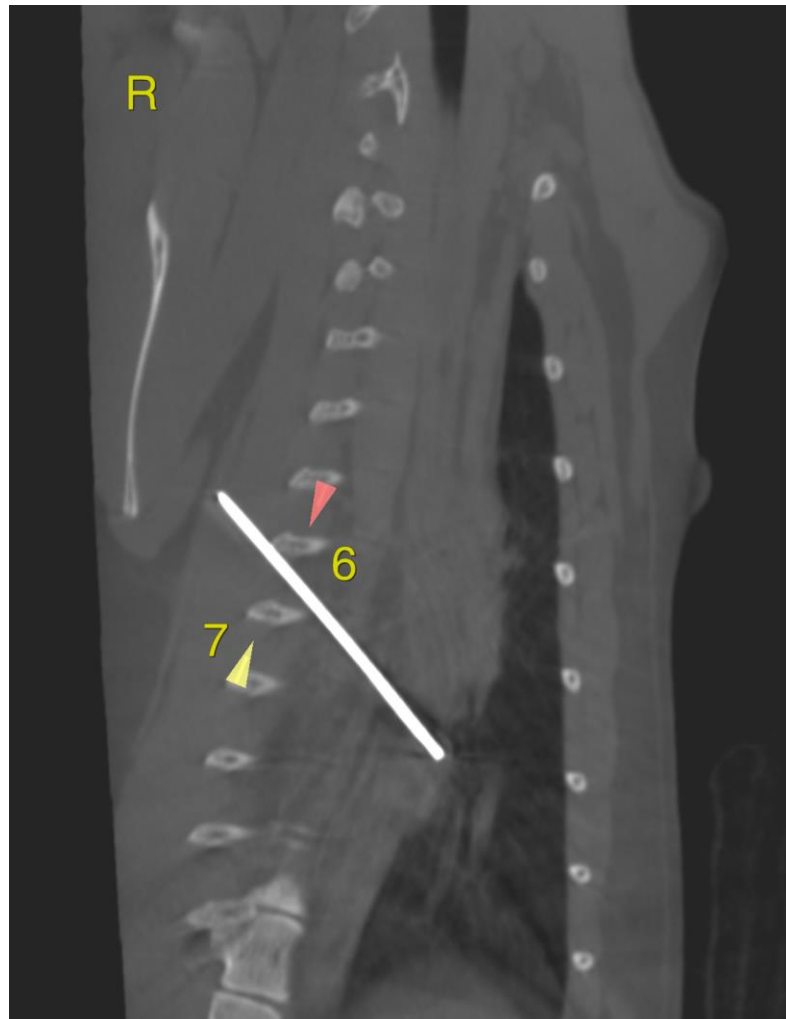
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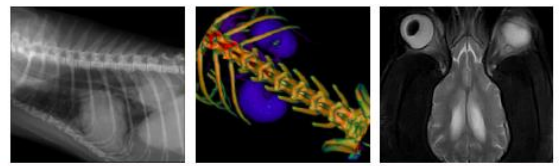
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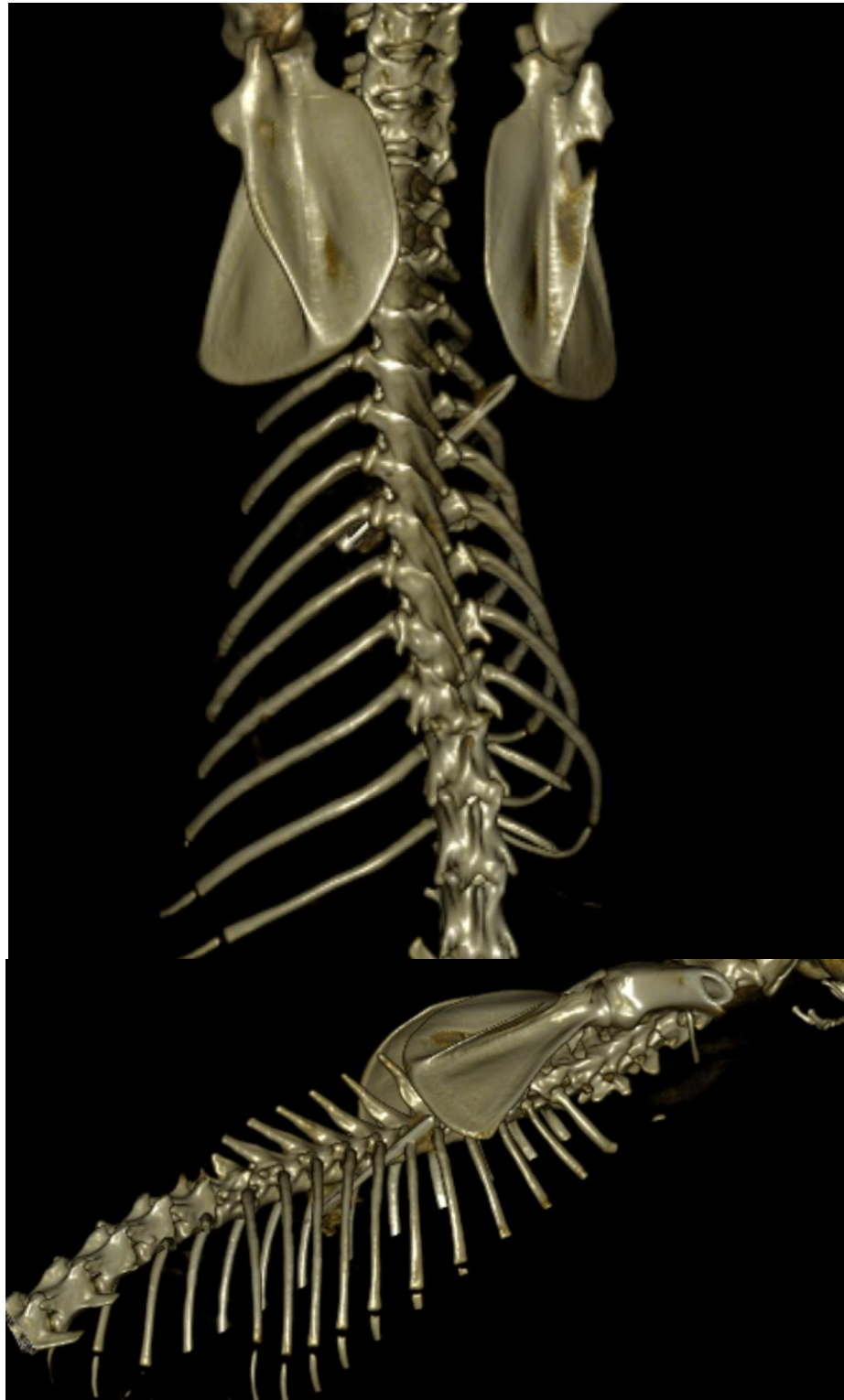
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

Feline

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

**BREED**

DSH

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