

**PATIENT**

Snoopy Hasking

PRESENTING CLINICAL SIGNS

Intra thoracic mass Left thorax cranial.

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Pre and post contrast studies provided for review.

BREED

Mixed

SEX

Male Neutered

AGE

11 Years

COMPUTED TOMOGRAPHIC FINDINGS

The first rib on the left side is completely lytic and impresses with an unstructured, amorphous and extra-pleural large mass originating from the first rib and expanding beyond the thoracic inlet cranially and caudally filling the left cranial hemithorax. The second rib shows moderate periosteal reactions. The mass demonstrates diameters of at least 9.1 x 8.1 cm having an unstructured fluid-filled center with diffuse and mild calcifications. There is direct paramedian contact to the thoracic spine at the level of Th1/2 noted. The spinal canal is inconspicuous. The cranial mediastinum containing trachea, esophagus and the brachycephalic trunk gets severely deviated to the right. A subtle amount of free pleural fluid on the left is recognized. The left cranial lung lobe indicates infiltration with marked peri-bronchial increase of density. There is no evidence of nodular pulmonary lesions.

Pooling of hyperdense/calcified sludge of the gallbladder is noted as an incidental finding.

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet
Specialist in
Diagnostic Imaging

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Highly aggressive and lytic bone lesion of the first left rib with formation of a large extra-pleural mass, involvement of the second rib and causing severe mediastinal and pulmonary shift and subtle pleural effusion
- Pulmonary infiltration of the left cranial lobe is highly suspected

HOSPITAL NAME

Animal Clinic of
Queens

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT findings are pathognomonic for a malignant bone neoplasia such as osteosarcoma/chondrosarcoma. The central fluid accumulation may represent secondary abscess or necrosis. I assume curative surgery is not possible due to the extend and size of the lesion. Pulmonary infiltration on the left is suspected.

REFERRING VET

Dr. J. Mucera

INVOICE

48725

DATE

12-3-21



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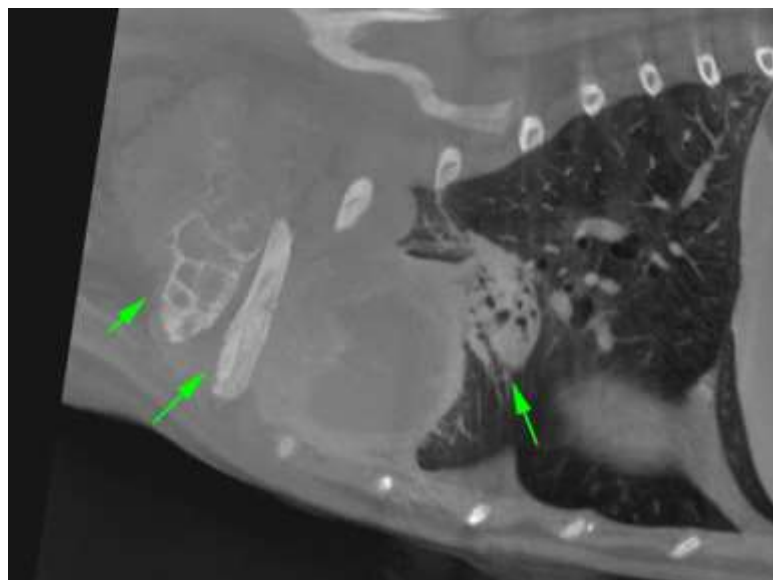
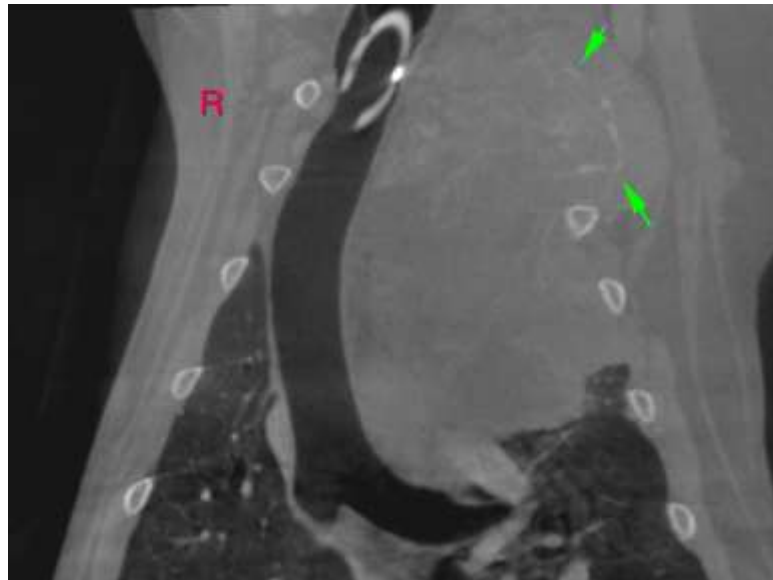
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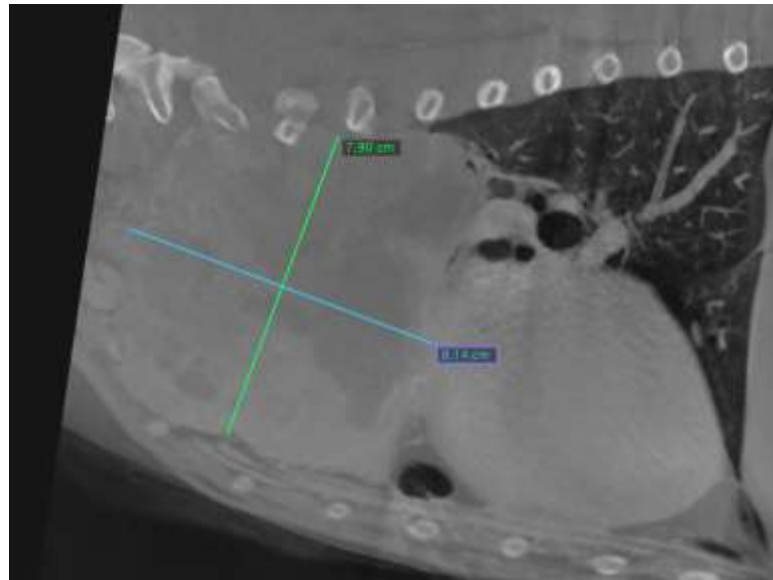
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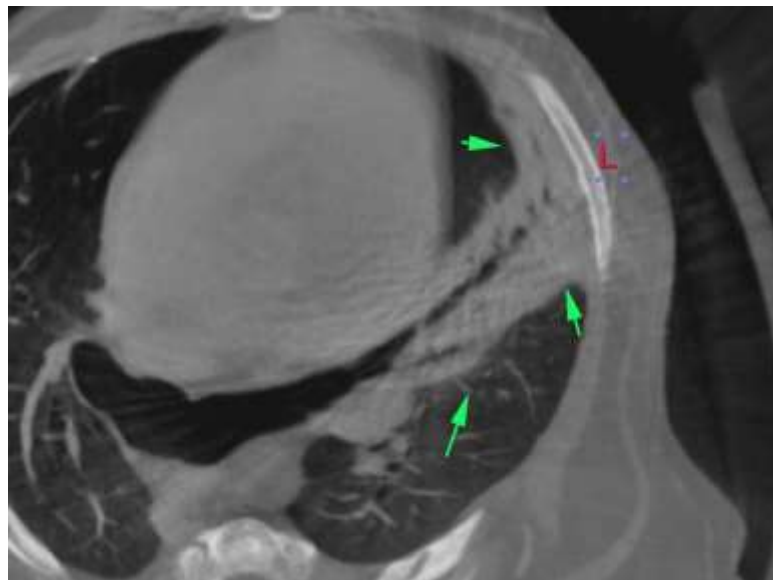
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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.

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
Sebastian.Jawinski@sonopath.com

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