



**PATIENT**

Liza Solomin

**PRESENTING CLINICAL SIGNS**

Presented Jan 3/21 for acute onset vomiting and lethargy. Abnormal PE/Chem/CBC/UA Results: GPE revealed generalized weakness and new heart murmur. Survey radiographs revealed large cranial mediastinal mass. Echocardiogram revealed mild right ventricular outflow obstruction caused by cranial mediastinal mass. Chemistry revealed moderate azotemia. CBC revealed thrombocytopenia (62k platelets). FNA and flow cytometry of mediastinal mass pending (Top Ddx: thymoma vs lymphoma).

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN**

**BREED**

French Bulldog

A pre- and post-contrast CT study of the thorax and abdomen in a bone, lung and soft tissue reconstruction are provided for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

**SEX**

F

Thorax

Multiple thoracic vertebra present as hemivertebra.

**AGE**

1 Year

A mild amount of fluid attenuating material is visible in the pleural cavity. The lung lobes are retracted from the thoracic wall and pleural fissure lines are visible. The lung parenchyma presents multiple regions of dystelectasis.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

In the cranioventral mediastinum, a multilobulated, uniform soft tissue attenuating and uniform contrast enhancing mass is visible; measuring approximately 6.3 x 6.3 x 10.2 cm in size. The heart is mildly displaced caudally by the mass effect.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are moderately enlarged, rounded, uniform soft tissue attenuating and contrast enhancing. The short-to-long-axis ratio is increased >0.5.

**HOSPITAL NAME**

Animal Health  
Partners

The cardiovascular structures including the pulmonary vasculature are within normal limits.

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

**REFERRING VET**

Dr. Shannon  
Westgarth

Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

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Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The renal lymph nodes are moderately enlarged and rounded. The hepatic lymph nodes are prominent.

**DATE**

1-4-22

The adrenal glands are within normal limits for size, shape and organ architecture.



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Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

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The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The bony and surrounding soft tissue structures reveal no abnormalities.

**BREED**

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**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Cranioventral mediastinal mass
- Lymphadenopathy sternal, cranial mediastinal, tracheobronchial, renal and hepatic lymph nodes
- Secondary mild pleural effusion
- Multiple hemivertebra thoracic spine

**SEX**

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

1 Year

The cranioventral mediastinal mass in combination with the lymphadenopathy of multiple thoracic & abdominal lymph nodes is highly concerning for underlying round cell neoplasia. FNA sampling has already been performed to confirm the diagnosis.

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Animal Health Partners

**REFERRING VET**

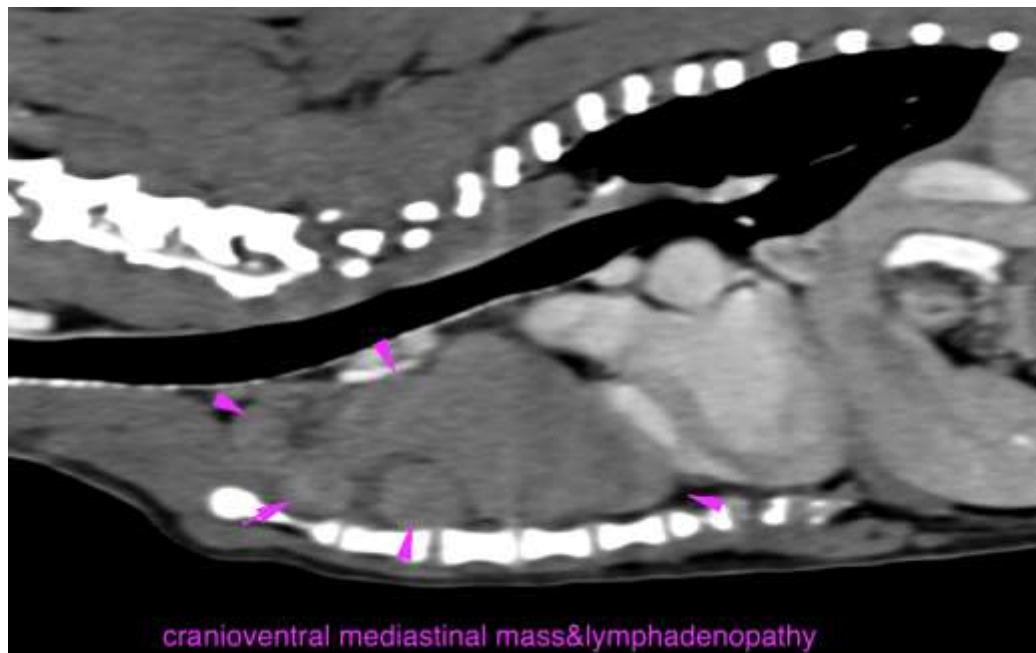
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**BREED**

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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 Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
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**SEX**

F

**AGE**

1 Year

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