



**PATIENT PRESENTING CLINICAL SIGNS**

Molly Sable Follow up after mass removal on Sept 13, 2021.

Abnormal PE/Chem/CBC/UA Results: Histopathology - intrathoracic mass from near the thymic region is an atypical epithelial neoplasm with some features that are suggestive of a thymoma with gland-like arrangements of epithelial cells, which also raises the possibility of an ectopic thyroid neoplasm or a neoplasm arising from thyroglossal duct remnants as secondary differentials.

**SPECIES**

Canine

**BREED**

Yorkiepoo

**COMPUTED TOMOGRAPHY OF THE THORAX**

A plain CT study of the thorax in a lung and soft tissue reconstruction is provided for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

Multiple intervertebral discs of the thoracic spine present central punctuate mineralization. Multiple metal attenuating cerclage wires are seen along the sternebra of the sternum.

**SEX**

FS

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

**AGE**

13 Years

A row of mineral attenuating staplers is seen within the cranioventral mediastinum.

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

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior.

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

**HOSPITAL NAME**

Animal Health  
Partners

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- History of excision of a mediastinal mass by sternotomy

**REFERRING VET**

Dr. Greg Kilburn

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The current CT study of the thorax presents without signs of reoccurrence of the excised cranioventral mediastinal mass nor evidence of pulmonary metastatic disease.

**INVOICE**

54274

**DATE**

9-26-22



**PATIENT**

Molly Sable

**SPECIES**

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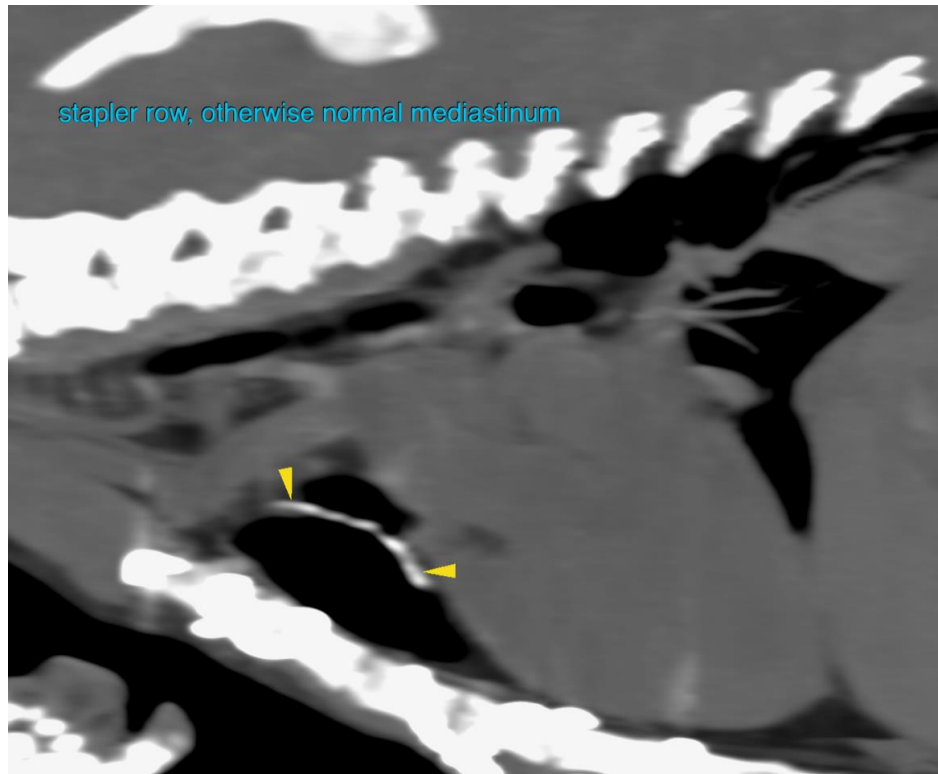
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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