



PATIENT PRESENTING CLINICAL SIGNS

Samantha Levitt Fat to soft tissue opaque smoothly margined mass lesion in the right caudal hemithorax.

SPECIES COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Feline A pre- and post-contrast CT study of the thorax are provided for review totaling 3 series. One pre-contrast series of the thorax, bone algorithm. Two post-contrast series of the thorax, bone algorithm.

BREED COMPUTED TOMOGRAPHIC FINDINGS

Bombay Within the right caudal lung lobe is a large, margined mass. The mass is affecting almost completely this lung lobe, and it is compressing and involving the respective lobar bronchus (RB4). The mass attenuation is mixed fat attenuation and hypoattenuating soft tissue. The HU density values are between - 109 to +55 in some central portions, however, it is predominantly fat attenuating. The mass measures approximately 6.0cm by 5.1cm by 2.7cm. The mass is contiguous to some portions of the caudal vena cava vein, and pleural diaphragmatic surface.

SEX

Female Spayed At least two soft tissue nodules are identified, one of them appears to be located at the peripheral border of the right middle lung lobe, caudal interlobar fissure and measuring 0.4cm. The other nodule measures 0.3cm and is located at the accessory lung lobe.

AGE

12 Years, 4 Months The middle tracheobronchial lymph node is mildly enlarged. The remainder of the tracheobronchial lymph nodes, sternal lymph nodes, and mediastinal lymph nodes are unremarkable.

The trachea is normal in luminal diameter and position.

INTERPRETED BY

The lumen of the main bronchus is normal.

Tilde Rodrigues Froes, DMV, MSc., Dr. Med Vet., Dipl. CBraRVet

There is a mild multifocal alveolar ground glass attenuating appearance, predominantly ventral and more cranially. A focal parenchymal band is seen in the cranial subsegment of the left cranial lung lobe.

HOSPITAL NAME

Mobile Pet Imaging The cardiac silhouette and pulmonary vessels are normal. The contrast media adequately fills the cardiac chambers and vessels on the post-contrast series.

The collimated abdomen is normal.

REFERRING VET

Ciruta The thoracic musculoskeletal structures are unremarkable.

No other abnormalities are identified.

INVOICE COMPUTED TOMOGRAPHIC DIAGNOSIS

59478 • Right caudal lung lobe mixed fat and soft tissue attenuating pulmonary mass. The differential diagnosis includes neoplasm, for example liposarcoma*. Other tumor types are less likely, however cannot be ruled out, for example, adenocarcinoma, adenosquamous carcinoma or squamous cell carcinoma.

DATE

7-20-23 • At least two soft tissue pulmonary nodules, likely metastatic pulmonary lesion.
• Mildly enlarged middle tracheobronchial lymph node, reactive or metastatic.



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SPECIES

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INVOICE

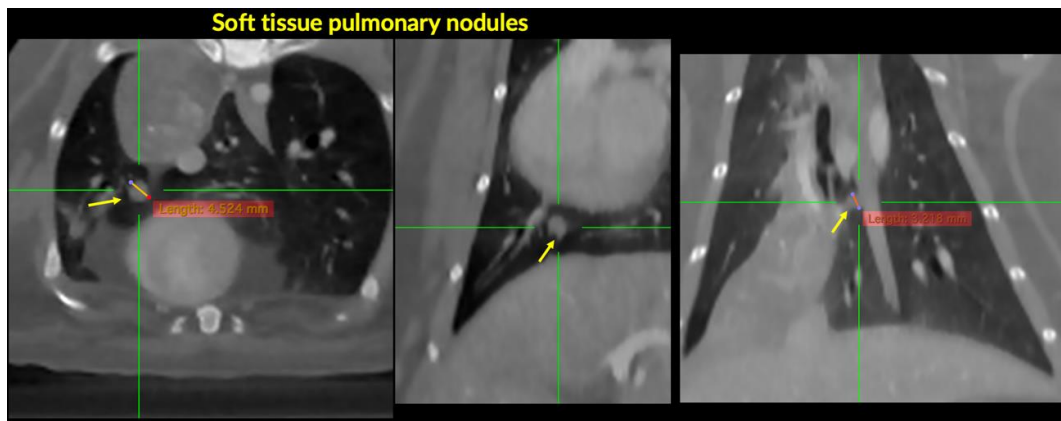
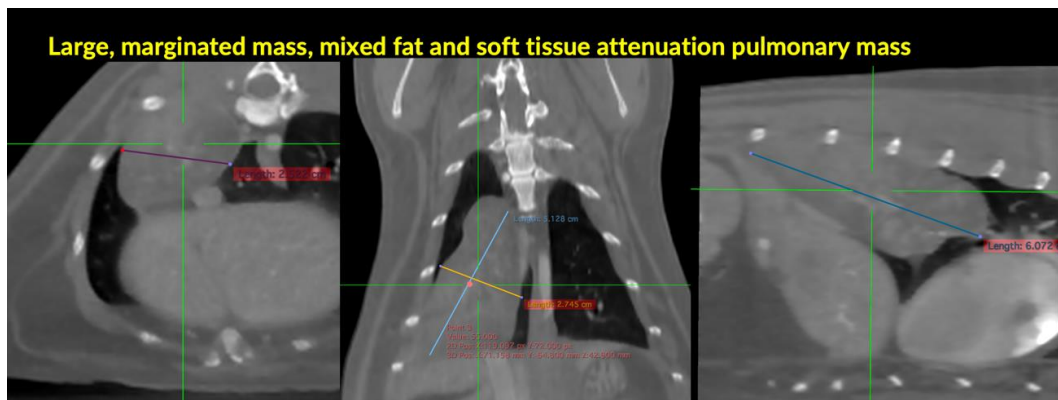
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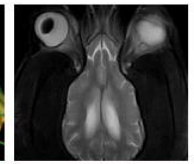
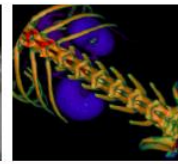
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The tomographic findings are correlated to the presented clinical history, and they confirm the position and mass attenuation characteristics. *The tomographic attenuation characteristics of the mass suggested liposarcoma, however, it is rare, in accordance with the literature. The mass is contiguous to the caudal vena cava vein, and due to that, adherence is not excluded. Also, the mass has a pleural tag on the diaphragm. To confirm the diagnosis, a biopsy is recommended. An oncologic surgical consult is suggested; however, the characteristics suggest that the mass is resectable. It may be amenable to ultrasound-guided fine-needle aspiration.





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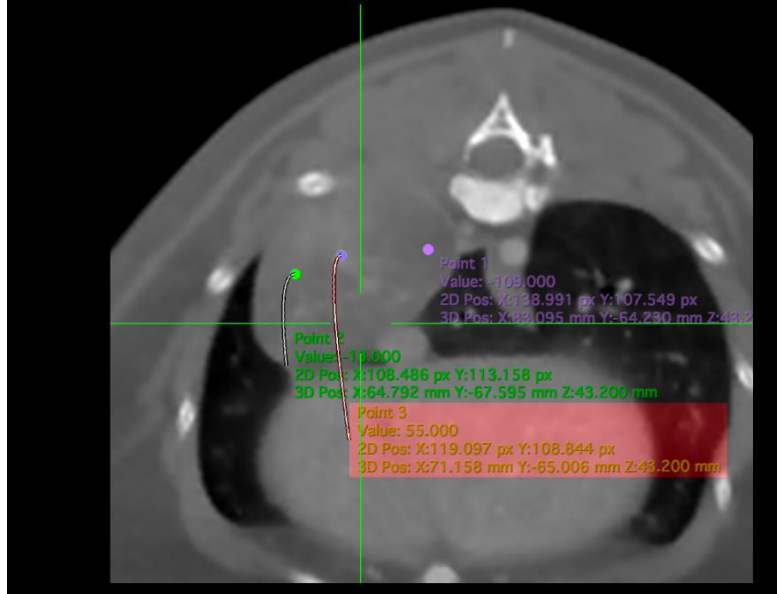
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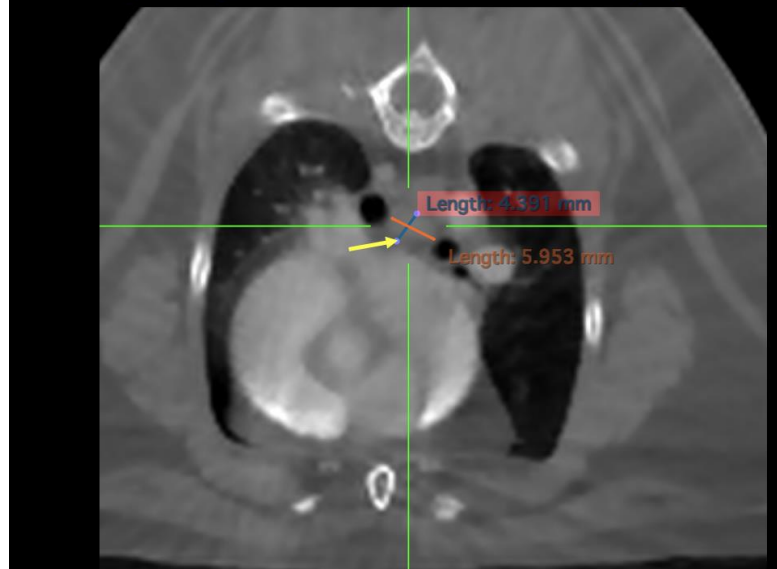
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Large, margined mass, mixed fat and soft tissue attenuation pulmonary mass



Mildly enlarged middle tracheobronchial lymph node





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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

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.

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