



PATIENT

Memeth Jimenez

SPECIES

Feline

BREED

Domestic Longhaired

SEX

NM

AGE

8Y

WEIGHT

14.1lbs

INTERPRETED BY

Dr. Tais Guimarães,
MV

IMAGING PERFORMED BY

José L. Alvarado Bruno,
CVT - CT Scan Technician

HOSPITAL NAME

Veterinary Image Center

REFERRING VET

Irene Vazquez, DVM, MS,
DACVIM (Oncology)

INVOICE

75181

DATE

5-27-26

PRESENTING CLINICAL SIGNS

Cranial mediastinal mass. Incidentally found during echocardiogram performed for patient's HCM. Mass is cavitated. Patient is asymptomatic. Concerned about neoplasia.

Abnormal PE/Chem/CBC/UA Results: CBC --- unremarkable CHEM --- GLU mild increased (176), TP mild increased (9.1), GLOB mild increased (5.6), CHOL mild increased (227)

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Plain and post-contrast studies provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

A soft tissue attenuating mass is noted on the cranial mediastinum with heterogeneous enhancement, multiple small cavitory fluid-containing areas, and smooth margins measuring 6.4 x 7.8 cm size. No significant lateralization seen causing displacement of the cranial vena cava, brachycephalic trunk and left subclavian artery. No vascular invasion seen.

Mediastinal lymph nodes are not individualized.

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

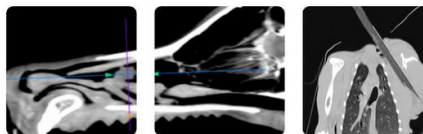
The lung parenchyma presents the expected architecture and attenuation behavior. No masses seen.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Cranial mediastinal mass, cavitory. No vascular invasion seen.
- No lung masses or nodules seen.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The findings are more suggestive of thymoma given the well-defined heterogeneous cranial mediastinal mass with cystic/necrotic components. Lymphoma cannot be ruled out. Histopathology is recommended for definitive differentiation from lymphoma, as cytology may be nondiagnostic or misleading.



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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.

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.

Dr. Tais Guimarães, MV
info@sonopath.com