Diagnostic Exercise
From The Davis-Thompson Foundation*

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Clinical History: A 16-year-old male intact Cocker Spaniel was referred for fluoroscopy and esophagogastroduodenoscopy to investigate a chronic history of ptyalism and regurgitation, with suspicion of gastrointestinal tract obstruction.

Clinical, Gross and Cytologic Findings: On presentation, the patient was responsive and in good body condition. Fluoroscopic examination revealed a radio-dense, well-demarcated, space-occupying mass within the cranial thorax at the level of T2-T4 vertebrae. Endoscopically a well-demarcated, smooth contoured, pale-pink, broad-based, firm and markedly vascularized mass protruding from the esophageal wall was confirmed (Figure 1). An endoscopic biopsy was taken from the mass (Figure 2) and laser ablation was performed. A 4.1 x 2.5 x 3.1 cm ulcerated mass was submitted for histopathological analysis (Figure 3). A cytology smear was prepared from the endoscopic biopsy and stained with Diff-Quick (Figure 4).

Follow-up questions: Histological appearance and differential diagnoses.
*The Diagnostic Exercises are an initiative of the Latin Comparative Pathology Group (LCPG), the Latin American subdivision of The Davis-Thompson Foundation. These exercises are contributed by members and non-members from any country of residence. Consider submitting an exercise! A final document containing this material with answers and a brief discussion will be posted on the CL Davis website (http://www.cldavis.org/diagnostic_exercises.html).

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