



PATIENT

Am LaRocca

PRESENTING CLINICAL SIGNS

Clinical Exam Findings: EENT mmbpink <2. CV/R no murmur/arrhythmia lungs clear increased inspiratory effort. abd palp benign. UG nsf. PLNs wnl. integ nsf. MS/N wnl.

SPECIES

The pleural fluid is cloudy and pink-tinged with flocculant material.

Feline

Abnormal lab-work values: Thoracocentesis 140cc hemorrhagic/thick/chunky fluid removed. Cytology- sheets of cells that look like lymphocytes and monocytes. No bacteria seen intra or extracellularly. No bacteria seen. Samples saved for cytology and culture.

BREED

Bengal

Current Medications: started amp/sub 30mg/kg IV Q8H enro 15mg/kg IV SID

SEX

Intact Male

Assessment: Decreased pleural effusion. The cause remains unknown. Definitive assessment of the mediastinum is difficult due to the remaining silhouette sign from the pleural effusion. There continues to be atelectasis of the cranial lungs, likely from the prior pleural effusion. Ultrasound examination of the thorax may be helpful for further assessment.

This study was performed post-thoracocentesis.

AGE

07/19/2022

**This study was limited to the thorax. There is a potential for pathology in organs that were not visualized.

LIMITED ULTRASONOGRAPHIC EXAMINATION OF THE THORAX

WEIGHT

3.76 kg

Thorax

A moderate amount of echogenic free fluid is observed within the thorax, with some aggregated echogenic, suspended debris seen in the left hemothorax. Two to three prominent lymph nodes are observed in the cranial mediastinum (the largest measuring 1.35 cm in length). The abdominal lymph nodes are normal/not visible. In the left hemithorax, a collapsed lung lobe is visualized.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM (*Small Animal Internal Medicine*)

ULTRASONOGRAPHIC FINDINGS

LIMITED ULTRASONOGRAPHIC EXAMINATION OF THE THORAX

IMAGING PERFORMED BY

Andrea Nicastro, DVM,
Diplomate ACVIM (*Small Animal Internal Medicine*)

Thorax

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HOSPITAL NAME

MP Blue Pearl EH

ULTRASONOGRAPHIC FINDINGS

- The pleural fluid may be secondary to pyothorax, neoplastic effusion, congestive heart failure, idiopathic chylothorax, other.

REFERRING VET

Dr. Danielle Fraser

- The prominent mediastinal lymph nodes may represent reactive lymph nodes or emerging neoplasia (i.e., lymphoma).

- Atelectasis of a lung lobe in the left hemithorax.

INVOICE

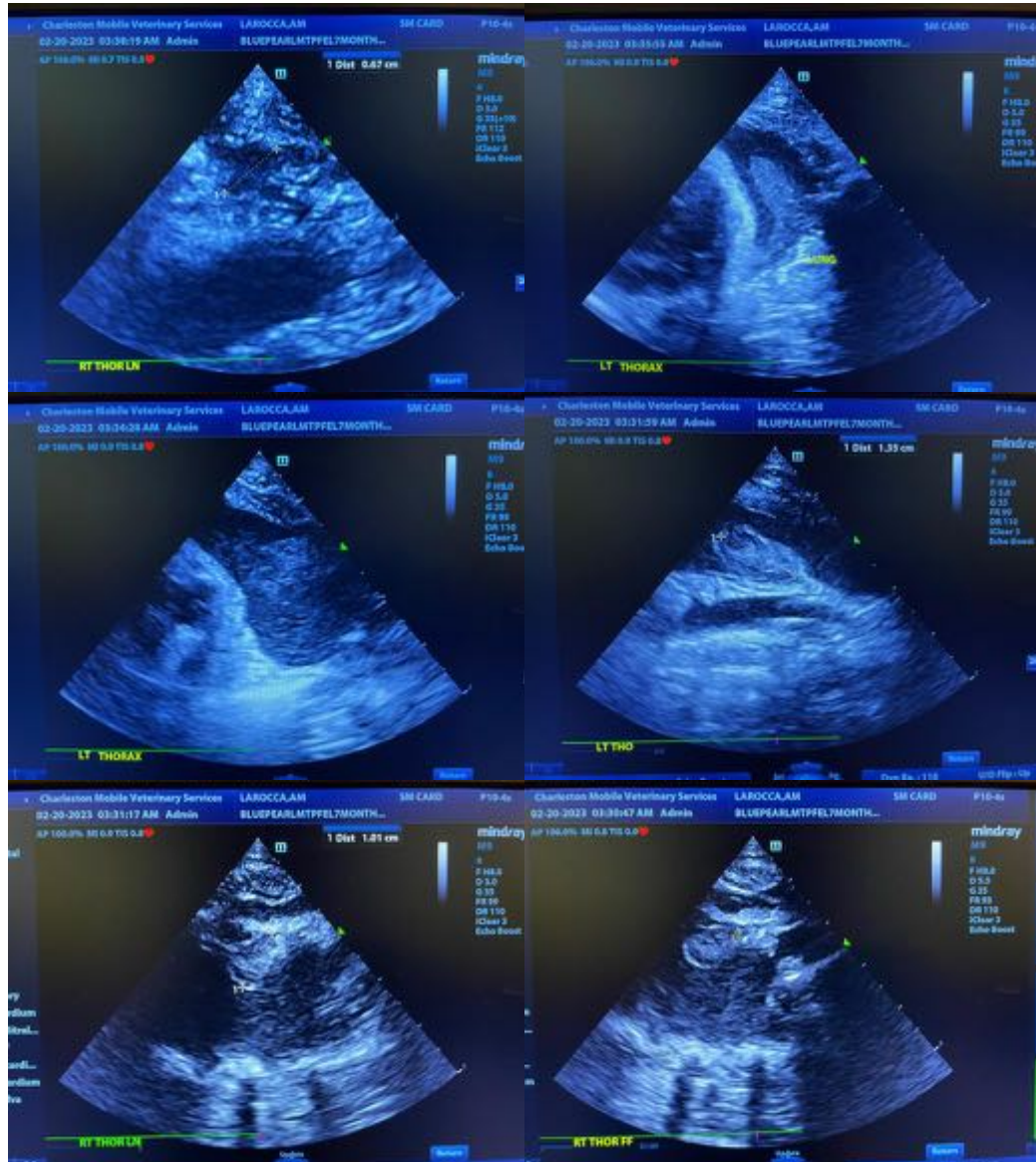
12254

DATE

2.20.23

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Consider initiation of broad-spectrum antibiotics and supportive care while awaiting the echocardiogram report and pleural fluid cytology and cultures.
- Also consider performing a triglyceride level on the pleural fluid and compare it to the serum triglyceride level (to further assess for chylothorax).
- If the echocardiogram and cytology results do not reveal an underlying cause for the pleural effusion, a thoracic CT scan may be warranted.
- Repeat thoracentesis should be performed as needed if the patient becomes dyspneic.



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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