

PATIENT

Fatty Boone

SPECIES

Feline

BREED

Domestic Medium Hair

SEX

Neutered male

AGE

9 years

WEIGHT

9.3 lbs

INTERPRETED BY

Eric Lindquist, DMV
 DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Mitchell VH

REFERRING VET

Dr. Georgeou

INVOICE

71678

DATE

2/18/26

PRESENTING CLINICAL SIGNS

- P presented for lethargy, increased respiratory effort noted on exam, pleural effusion found on rads. 150ml fluid drained and submitted for cytology. Not very cellular but suggestive of lymphoma.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

The cranial mediastinum revealed multi-focal, hypoechoic distorted lymph node enlargement measuring up to 2.5 x 1.8 cm. Irregular, nodular pleural changes and pleural effusion are noted. There are areas of mineralized lung consolidation noted and measured up to 2.3 cm. The cardiac presentation revealed normal left-sided volumes and mild right sided enlargement. The contractility, septal and free wall thicknesses were normal. The right atrial and left atrial ratio was 1:1. There was no pericardial effusion noted, yet there was a large amount of pleural effusion. The pleural effusion is non-cardiogenic.

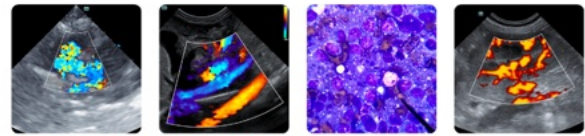
FELINE CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm)	LVIDd (cm)	LVWd (cm)	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.3-0.6	1.0-2.1	0.25-0.6	35-67	80-100
PATIENT	9.3 lbs	NM	0.4	1.8	0.35	69	95
FELINE CARDIAC PARAMETERS	LA/AO (M-mode)	LA/AO HEART BASE (Sisson)	LAD LA MAX 4 Chamber		LVOT VEL. (m/s)	RVOT VEL. (m/s)	IVRT (m/)
NORMAL PARAMETER	<1.5	1.6	0.7-1.7		<1.6	<1.3	40-60
PATIENT	1.4	1.5	1.56		1.2	0.92	NM
Adapted from June Boon, Veterinary Echocardiography, 1998							
Sisson D et al. JVIM 1991; 5: 232, Jacobs et al. Am J Vet Res 1985; 46:1705							

ULTRASONOGRAPHIC FINDINGS

- Multi-focal, nodular pleural changes as well as areas of lung consolidation and lymphadenopathy is present. Thoracic neoplasia presentation. Thoracic lymphomatosis, carcinomatosis or similar is suspected.
- Normal cardiac volumes and contractility. Minor right-sided enlargement likely owing to increased thoracic pressures.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no evidence of volume overload. No primary cardiac component is noted in this patient. An abdominal sonogram is recommended to assess for primary disease as this may be a metastatic pattern in the chest. Pleurocentesis and cytospin may prove diagnostic as a definitive diagnosis. However, an



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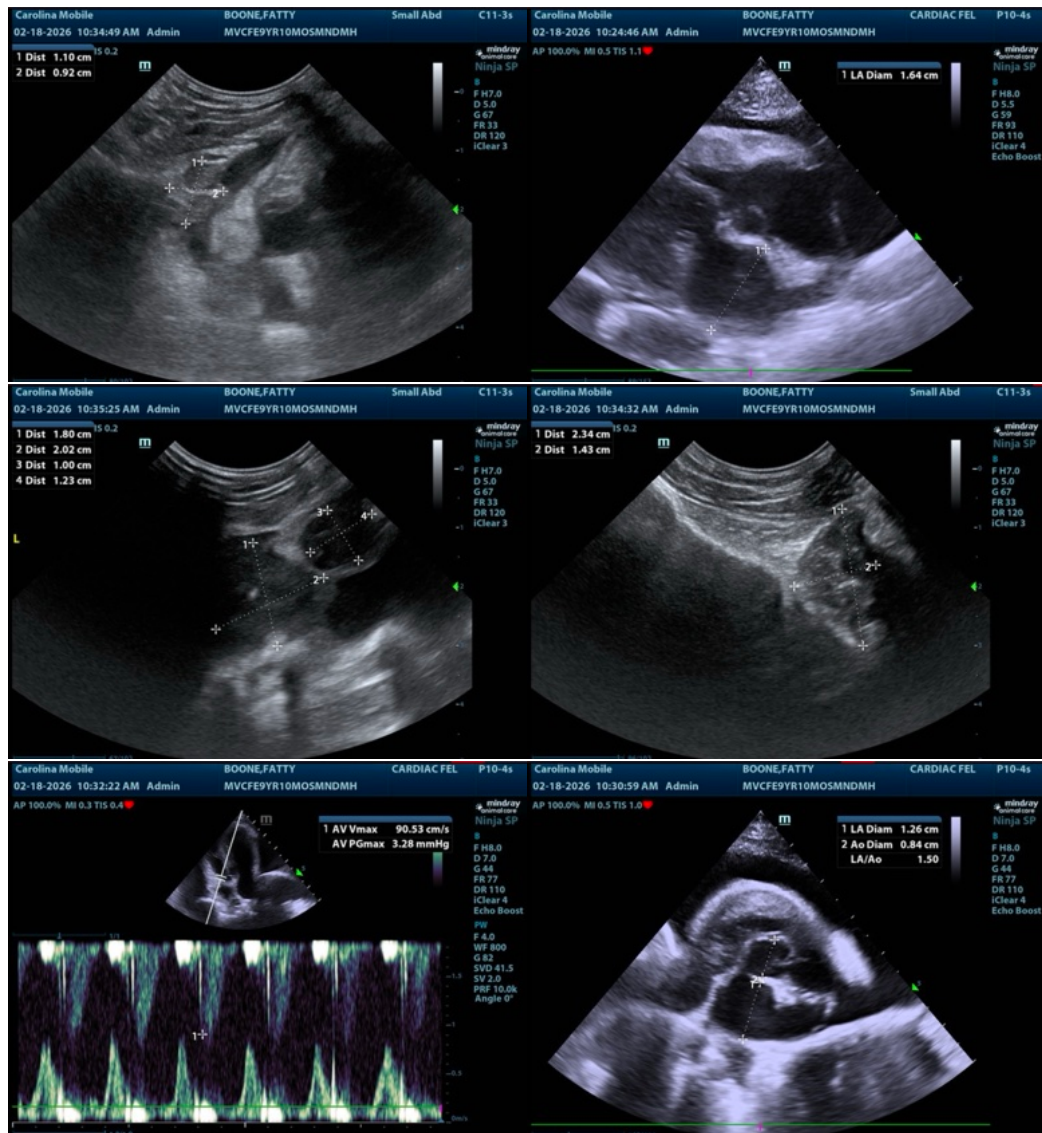
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abdominal sonogram may provide for more accessible direct tissue access or FNA. Some areas of lung consolidation and lymph nodes may be accessible by FNA from intercostal approach. However, the cranial mediastinal mass is enveloped by the aorta and cranial vena cava. This may be difficult to sample readily without complication.





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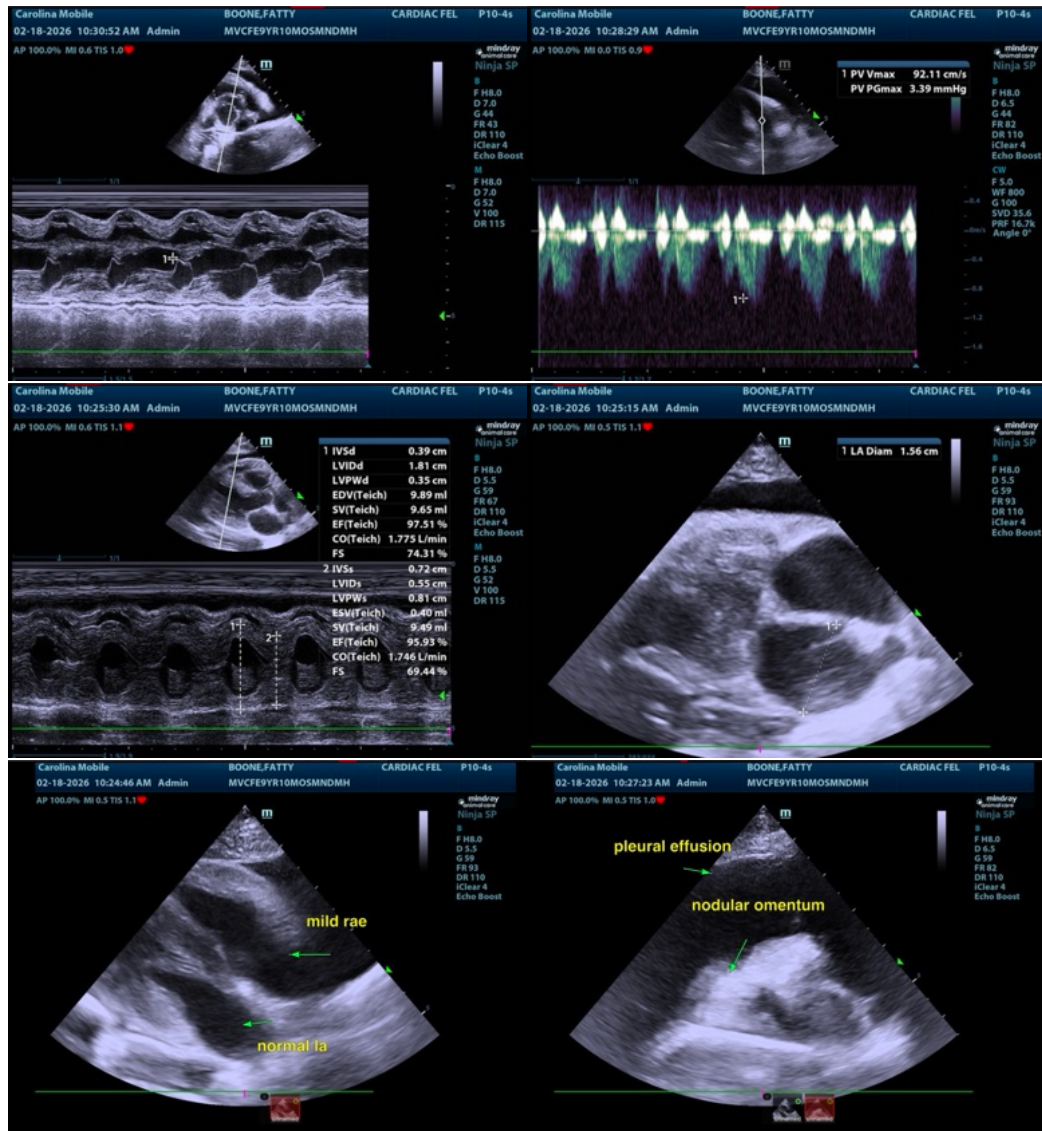
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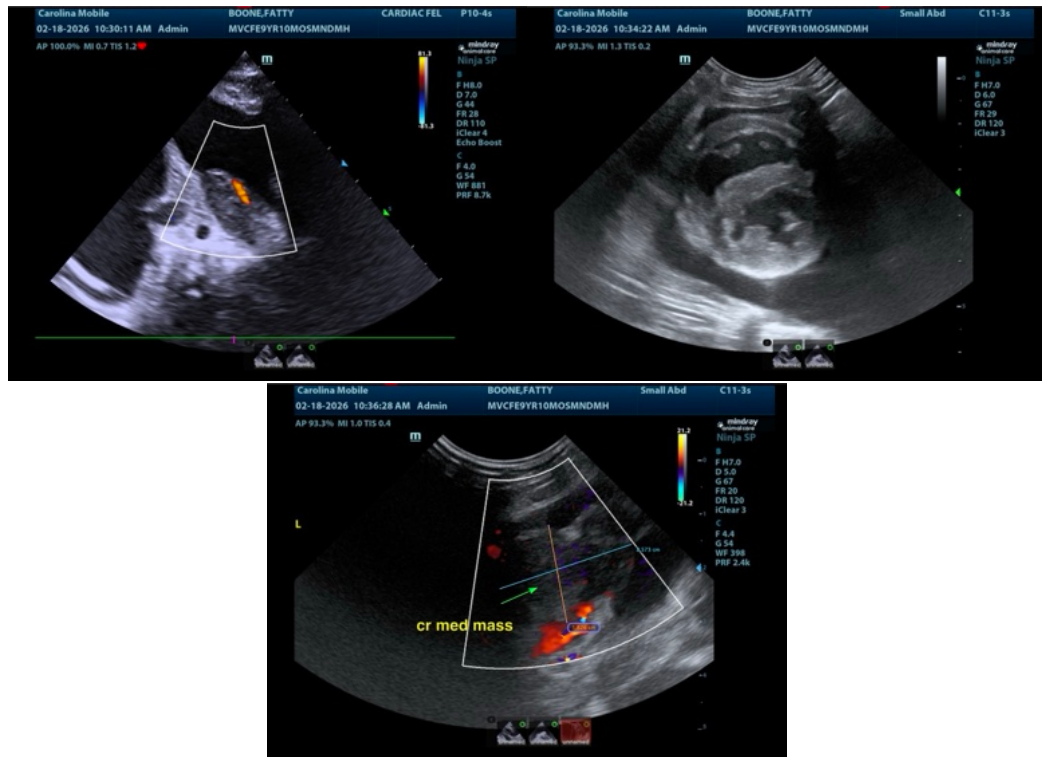
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

info@SonoPath.com