



PATIENT

Nott Hartsgrove

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

14 Years 5 Months

WEIGHT

8.56 Pounds

INTERPRETED BY

Heike Rudorf, DVM, Dr.
med. Vet., DipECVDI
DVR

IMAGING PERFORMED BY

Iyana

HOSPITAL NAME

DPC Veterinary
Hospital

REFERRING VET

Dr. Rivera

INVOICE

35831

DATE

2/13/26

PRESENTING CLINICAL SIGNS

History: MAMMARY MASS CONCERN FOR CARCINOMA PRE-SX WORKUP

Abnormal PE/Chem/CBC/UA Results: CV/Respiratory: Normal heart rate and rhythm, no murmur, pulses strong and synchronous, normal bronchovesicular sounds. Lab work pending

RADIOGRAPHIC STUDY OF THE THORAX

The body condition score is 8/9 with smooth, alternating layers of fat and soft tissue opacity.

The bony structures appear physiological.

The cranial mediastinum is of physiologic size and opacity. The trachea diverges from the thoracic vertebrae, and the carina is located level with T5.

The lung lobes are well aerated and extend to the thoracic boundaries. Pulmonary vessels are well outlined to the tertiary branches. Multiple small, soft tissue nodules are associated with longitudinal blood vessels and mirror their size. In right lateral recumbency the nodular structure ventral to the caudal vena cava appears to be larger than the adjacent, longitudinal vessel and is also visible as a completely round structure overlying the pulmonary vein level with ribs 9/10 on the left.

The cardiac silhouette occupies 75% of the chest height and 2 intercostal spaces. Chamber or outflow tract enlargement is not obvious.

RADIOGRAPHIC DIAGNOSIS

- Multiple end-on blood vessels
- Obesity

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Even though one nodule appears slightly larger than the adjacent, longitudinal vessel, it is very opaque and absolutely circular. I thus feel that end-on blood vessel is more likely diagnosis than metastasis. Depending on the histopathology report, a follow up radiograph 2 months post surgery can help identify if it has changed in size and opacity.

Obesity is known to worsen clinical signs of cough and impair lung function; weight control is strongly recommended.



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.



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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.

Heike Rudolf, DVM, Dr. med. vet., DipECVDI, DVR
info@sonopath.com