



**PATIENT PRESENTING CLINICAL SIGNS**

Thunder Trumbauer History: 3-week history of decreased appetite, seems uncomfortable, pleural effusion - lymphocytic and inflammatory. Medication: Prednisolone, Mirtazapine

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE THORAX**

Feline Sonographic assessment of the thoracic cavity revealed mild to moderate volume, primarily anechoic pleural effusion, exhibiting mild echogenic changes suggestive of fluid cellularity. Regional reduced volume mildly nonhomogenous lung, exhibiting hyperechoic foci suggestive of likely air entrapment vs discrete mineralization present.

DSH

**SEX**

Neutered Male

The subjective cardiac assessment revealed overall normal left and right heart chamber enlargement with potential borderline to minor increased LV wall thickness, suspected to be secondary to dehydration/hypovolemia and minor secondary LV pseudohypertrophy. HCM criteria was not met. The left atrium was normal in volume/dimension. Subjective adequate LV systolic function was present. No overt evidence of cardiac tumors with suspect homogenous pericardial fat present.

**AGE ULTRASONOGRAPHIC FINDINGS**

2011

- Mild to moderate pleural effusion, exhibiting mild echogenic changes
- Overtly normal cardiac structure and function with borderline increased LV wall thickness- noncardiogenic pleural effusion
- Subjective lung atelectasis- possible pulmonary neoplastic/metastatic criteria cannot be excluded

**WEIGHT**

18.4

**INTERPRETED BY**

R. McKenzie Daniel,  
DVM, DABVP  
(Canine and Feline)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Definitive intrathoracic mass was not overtly evident in the study, however, given pathology assessment of the pleural effusion, intrathoracic or perithoracic neoplastic process, which at times may not be sonographically evident, may be of likely primary concern. Further assessment may include abdominal ultrasound to assess for primary abdominal pathology, effusion culture and sensitivity if clinically indicated, and ideally, thoracic CT to assess for evidence of non-sonographically evident pathology as a primary or contributing factor.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

Stanglein VC

**REFERRING VET**

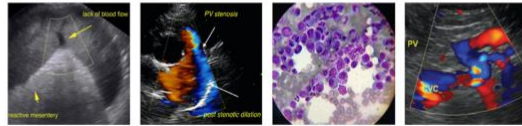
Dr. Rothrock

**INVOICE**

20357

**DATE**

1/4/23



**PATIENT**

Thunder Trumbauer

**SPECIES**

Feline

**BREED**

DSH

**SEX**

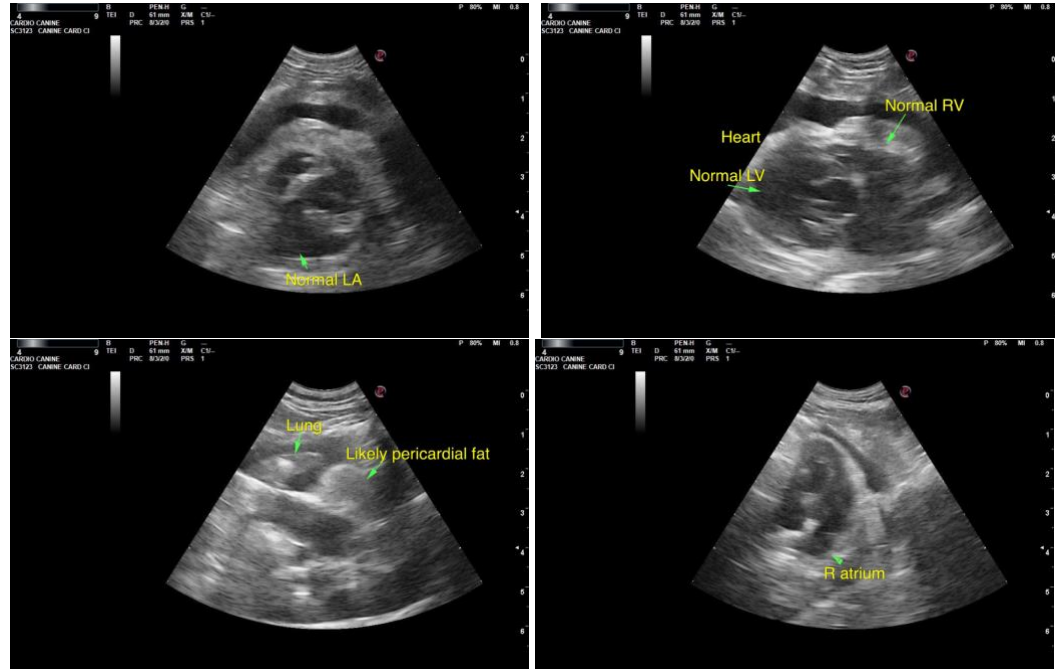
Neutered Male

**AGE**

2011

**WEIGHT**

18.4



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.

**INTERPRETED BY**

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DVM, DABVP  
(Canine and Feline)

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