



PATIENT

Nirvana Sturgeon

SPECIES

Feline

BREED

DLH

SEX

Neutered Male

AGE

5 Years

WEIGHT

13.5 pounds

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP (Canine
/ Feline Practice)

IMAGING PERFORMED BY

Dr. Harold Mike Beard

HOSPITAL NAME

Animal Care Veterinary
Center

REFERRING VET

Dr. Chris Ward

INVOICE

14613

DATE

03/26/26

PRESENTING CLINICAL SIGNS

Submitted study contained 34 videos of the assumed area of the left thorax. Images were not labeled.

- Mass in chest, referring doctor first noted about 1 1/2 yr ago.
- Hx of collapsed/consolidated lung (2/25/26), asthma, coughing today

Abnormal PE/Chem/CBC/UA Results: Space occupying mass noted in left side of chest. RDVM noted increased RR, decreased lung sounds but no crackles or wheezing. Radiographs showed consolidated lung on left, heart displaces dorsally.

ULTRASONOGRAPHIC EXAMINATION OF THE THORAX

Spleen

The spleen was present in the left cranial abdomen and visualized between the left caudal rib spaces and appeared sonographically unremarkable measuring approximately 1.0 cm width.

Liver & Gallbladder

The liver was sonographically unremarkable exhibiting homogenous parenchyma.

The gallbladder was non-distended in size with mild nonorganized bile sediment.

Thorax

Possible homogenous consolidated pericardial lung in the left thorax.

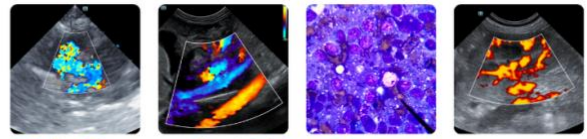
No evidence of pericardial effusion around the visualized heart. No evidence of pleural effusion or thoracic lymphadenopathy.

ULTRASONOGRAPHIC FINDINGS

- Possible homogenous consolidated pericardial lung in left thorax.
- Overtly normal visible liver with mild gallbladder debris.
- Normal spleen visible left cranial abdomen and between ribs.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A definitive thoracic or pulmonary mass in the left thorax was not obvious. Potential for homogenous consolidated left pericardial lung is possible, yet no overt evidence of neoplastic criteria or pleural effusion. Given normal appearing liver and spleen in the presumed area of the left thoracic pathology, consideration for a potential hernia may be indicated. Correlation with thoracic radiographs and consideration for thoracoabdominal CT is recommended.



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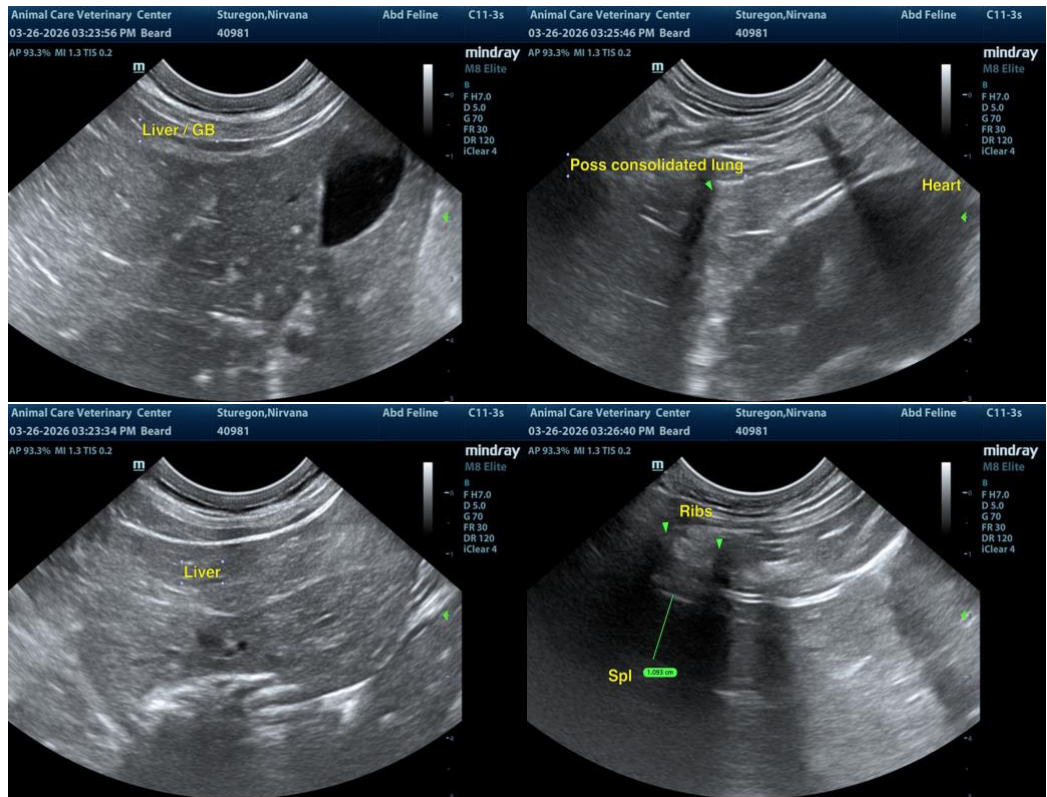
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

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