



PATIENT

Bigfoot James

SPECIES

Feline

BREED

Maine Coon

SEX

Neutered Male

AGE

10 Years 3 Months

WEIGHT

7.4 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Renee Trionfetti VMD

HOSPITAL NAME

Cypress Veterinary
Clinic

REFERRING VET

Laura Johnson VMD

INVOICE

16216

DATE

05/14/26

PRESENTING CLINICAL SIGNS

Thoracic ultrasound and Echocardiogram to further evaluate pleural effusion (r/o congestive heart failure, neoplasia, infectious disease). Possible chylothorax. Yesterday, thoracocentesis removed 350 mls milky fluid from right lateral chest and 100 mls from left side. Weight loss. Otherwise doing fine at home. E/D/Bm/U wnl. Did not notice any respiratory issue at home. Abdominal breathing with moderate effort, mild wheezing, dull lung sounds ventrally noted during presurgical exam. for a dental. PMHx: UO with PU sx.

Abnormal PE/Chem/CBC/UA Results: Blood Pressure sternal, RF #3: 90, 90, 88 mmHg - CXR: Pleural effusion, post-drainage films much improved with residual fluid, cranial lung fields still obscured - SNAP test (leukemia/FIV/heartworm): Negative x3 - CBC: Hct 43.9%, Plts 218-n, mild lymphopenia, remainder NSF - Chem: TCO2 23 H, ALT 22 L, Chol 980n, Triglycerides 27-n, CK 495 H, remainder NSF - ProBNP: pending - UA: USG 1.052, pro 2+, NSF - UPC; pending - T4: 2.4-n - Pleural fluid: white/milky, Pro 5.5, Chol 103, Triglyceride 1,471, RBC < 100K, nucleated cells 19,170 - Pathologists report on pleural effusion is pending.

ULTRASONOGRAPHIC EXAMINATION OF THE THORAX

A mild to moderate volume of echogenic pleural effusion was present. Areas of lobar nonhomogenous nodular lung with associated pulmonary comet tail artifact and possible areas of air entrapment.

Intermittent, mildly swollen to hypoechoic thoracic/sternal lymphadenopathy was present with an example of lymph nodes measuring 1.0 cm in diameter. Generalized hyperechoic pericardial tissue/fat echogenicity.

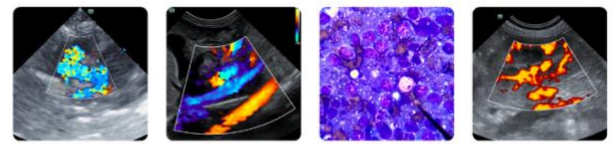
ULTRASONOGRAPHIC FINDINGS

- Mild/moderate volume of echogenic pleural effusion.
- Lobar nonhomogenous nodular lung exhibiting pulmonary comet tail artifact and possible air entrapment.
- Intermittent mildly swollen hypoechoic thoracic/sternal lymphadenopathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Assuming non-cardiogenic pleural effusion, the nonhomogenous nodular lung presentation with associated comet tail artifact and suspect air entrapment are highly suggestive of neoplastic criteria, i.e. carcinoma or other. Alternative considerations such as inflammatory or infectious disease, FIP or other are thought less likely.

Correlation with echocardiogram, effusion analysis cytology +/- culture and sensitivity if evidence of inflammatory component is recommended. Thoracic CT is likely ideal for further clarification pending additional diagnostics.



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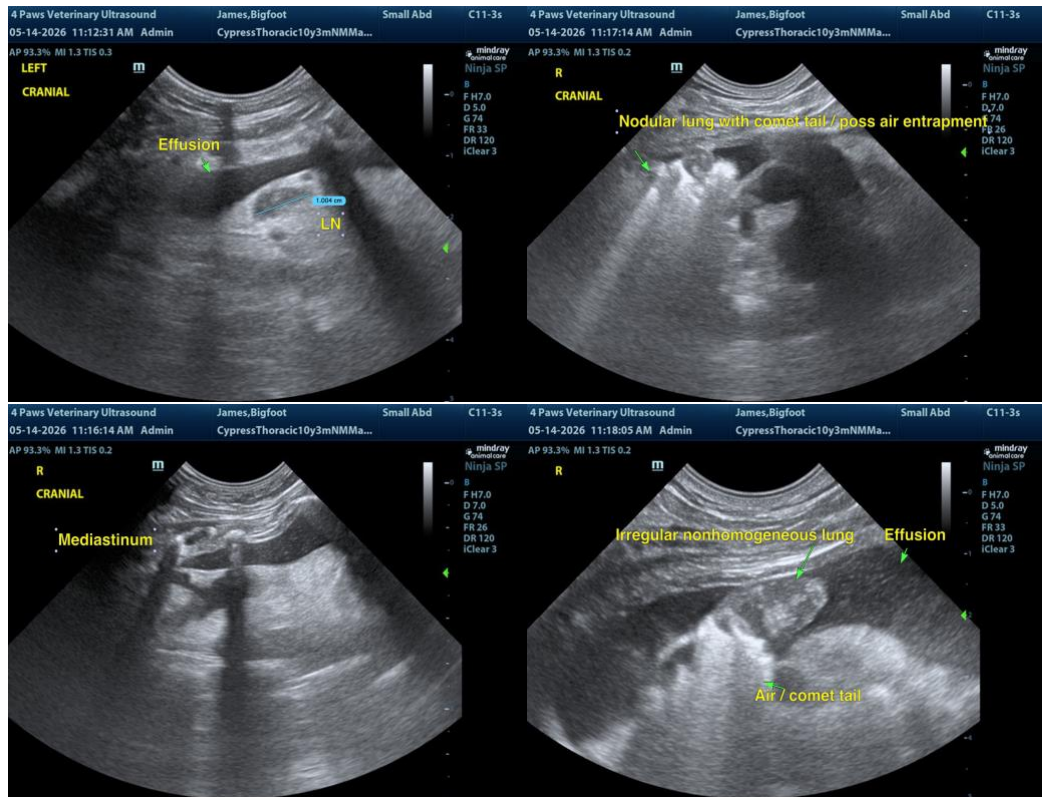
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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