



PATIENT

Coco David

SPECIES

Canine

BREED

Poodle

SEX

FS

AGE

11Y

WEIGHT

7.9kg

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

IMAGING PERFORMED BY

Mobile Pet Imaging

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Armstrong

INVOICE

74125

DATE

3-10-26

PRESENTING CLINICAL SIGNS

Single pulmonary mass was found on radiograph. No other masses or lesion found on abdomen or other body location. Surgical planning.

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Plain and post contrast studies are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

The bony and surrounding soft tissue structures are within normal limits.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern are uniform and considered within normal limits.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

There is a single, well defined, ovoid mass measuring approximately 32x 30mm within the caudal aspect of the left caudal lung lobe. The mass is cavitated, containing gas, and internal septations. A thick, soft tissue attenuating wall with increased contrast enhancement is seen. No additional pulmonary nodules, masses, or consolidations are present. The surrounding lung parenchyma presents mild ground glass opacity without evidence of additional nodules or hemorrhage.

Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Single, ovoid, cavitated mass within the left caudal lung lobe.
- No evidence of additional pulmonary or mediastinal lesions.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The CT features suggest a resectable solitary pulmonary lesion compatible with primary pulmonary neoplasia with cavitation such as carcinoma or other primary tumor and less likely abscess or granulomatous lesion. The mass would be accessible for ultrasound guided sampling. However, the diagnostic yield can be low, especially because of the cavitation, and since this is a single mass in a resectable position, immediate surgical excision of the left caudal lung lobe for both diagnostic and therapeutic purposes can be considered. Histopathology of the mass will be required to confirm diagnosis.



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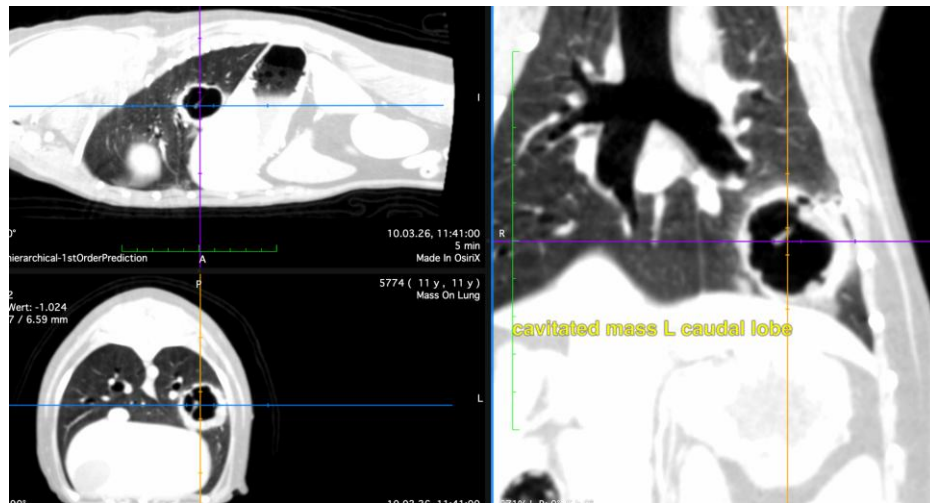
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley (Ondreka), DVM, Dr. med. vet., DipECVDI
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