

## PATIENT

Lucy McIntyre

## SPECIES

Feline

## BREED

DSH

## SEX

FS

## AGE

12Y

## WEIGHT

9.7lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Hamburg Veterinary  
Clinic

## HOSPITAL NAME

Hamburg Veterinary  
Clinic

## REFERRING VET

Dr DenHeyer

## INVOICE

74392

## DATE

3-30-26

## PRESENTING CLINICAL SIGNS

- became hypoxic under anesthesia
- no other clinical signs

## RADIOGRAPHIC STUDY OF THE THORAX

Left lateral and ventrodorsal views of the thorax totaling 2 images available for review in jpg format.

## RADIOGRAPHIC FINDINGS

There is a soft tissue mass effect in the cranioventral mediastinum partially effacing the cardiac silhouette and widening the mediastinum.

The assessment of the cardiac silhouette is limited owing to the border effacing mass effect. No evidence of left or right atrial enlargement is seen. There appears to be mild redundancy of the aortic arch. The cardiac borders appear otherwise unremarkable.

Mild diffuse increase in interstitial opacity of the lung is noted. Mild bronchial markings are seen. There are no pulmonary nodules, consolidations, or mass effects.

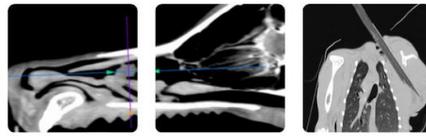
Mild esophageal aerophagia is noted likely related to intubation and anesthesia.

## RADIOGRAPHIC DIAGNOSIS

- Cranioventral mediastinal mass effect.
- Mild diffuse interstitial lung changes – likely anesthesia related.

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The cranial mediastinal mass effect may contribute to hypoxia under general anesthesia due to compression of thoracic structures. The lungs otherwise appear clear with mild interstitial and bronchial changes likely secondary to anesthesia rather than primary pulmonary disease. Differential diagnosis for the cranioventral mediastinal mass effect includes lymphoma, thymoma, ectopic thyroid, or other mediastinal mass including mediastinal cyst. CT of the thorax for detailed assessment of the mass, vascular involvement, and surgical planning can be considered. Ultrasound guided FNA or biopsy of the mass, if accessible and patient's condition allows, can be considered as well.



## PATIENT

Lucy McIntyre

## SPECIES

Feline

## BREED

DSH

## SEX

FS

## AGE

12Y

## WEIGHT

9.7lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Hamburg Veterinary  
Clinic

## HOSPITAL NAME

Hamburg Veterinary  
Clinic

## REFERRING VET

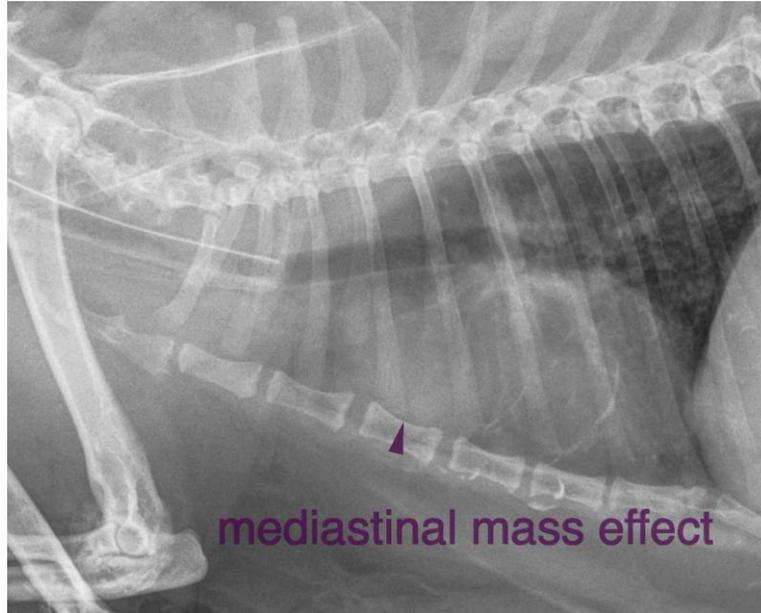
Dr DenHeyer

## INVOICE

74392

## DATE

3-30-26



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  
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,  
Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.  
[info@sonopath.com](mailto:info@sonopath.com)