

## PATIENT PRESENTING CLINICAL SIGNS

Essie C2446 Animals  
in Distress

- persisting mass effect
- no improvement with antibiotics based on culture
- FNA showed inflammation

## SPECIES

Feline

## RADIOGRAPHIC STUDY OF THE THORAX

Radiographic study of the thorax, lateral and ventrodorsal views, 2 each from December 25 and February 26, totaling 4 available for review.

## BREED

DSH

## RADIOGRAPHIC FINDINGS

The lungs are deeply inflated. Chronic generalized bronchial lung pattern is present consistent with long standing airway inflammation.

## SEX

FS

Partial atelectasis is noted in the left cranial lung lobe with no radiographic evidence of change between the two examinations, likely permanent consistent with chronic mucous plugging or airway obstruction.

## AGE

7yr

There is a soft tissue mass in the left caudal lung lobe measuring ~ 18 mm in diameter. There are no appreciable changes in size noted between December 25 and February 26. Margins are relatively well defined.

## INTERPRETED BY

Nele Eley (Ondreka),  
DVM Dr. med. vet.,  
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The heart presents normal size and shape. Vertebral heart score is ~ 7.6.

There is no significant mediastinal shift.

No evidence of pleural effusion is noted.

Course and width of the trachea are considered within normal limits.

## HOSPITAL NAME

For Cats Only  
Veterinary Clinic

## RADIOGRAPHIC DIAGNOSIS

- Chronic bronchial disease with partial left cranial lobe atelectasis-likely representing permanent changes due to chronic airway inflammation and mucous plugging
- Left caudal lung lobe mass stable over two months

## REFERRING VET

Renee Ziegler-Post

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

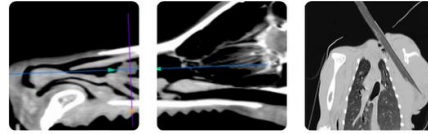
The radiographic presentation of the left caudal lung lobe mass raises concern for slow growing neoplasia such as pulmonary carcinoma. Chronic organized inflammatory mass such as granuloma is considered less likely but cannot be ruled out entirely. Advanced imaging such as thoracic CT can be considered. Repeat sampling could be considered as well. The mass does not appear to be accessible for ultrasound guided FNA so that either imaging, monitoring or lung lobectomy followed by histopathologic examination could be discussed in this patient.

## INVOICE

24114

## DATE

03/04/2026



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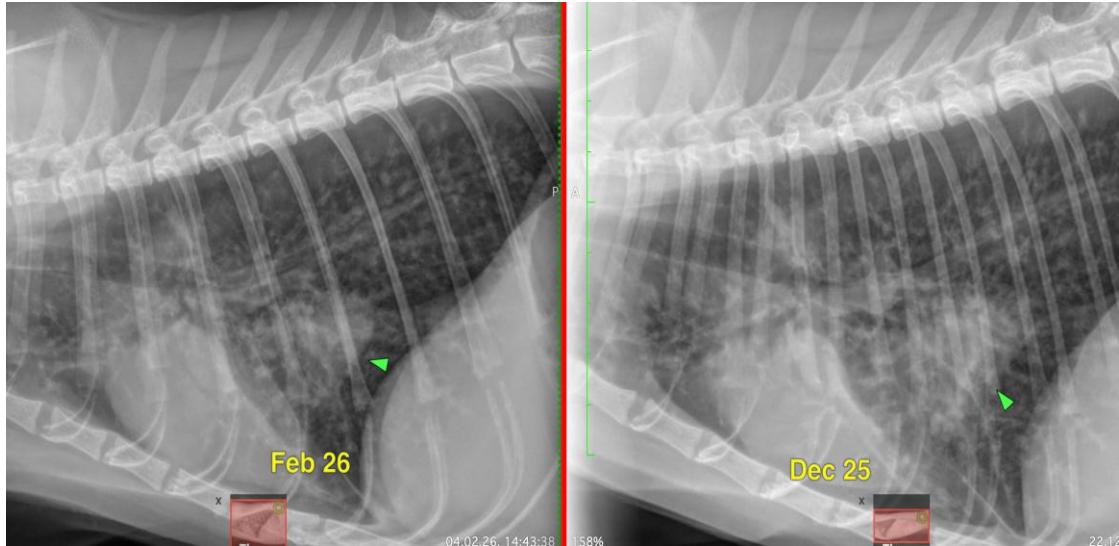
Renee Ziegler-Post

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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.

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