



PATIENT

Coco Ryczak

SPECIES

Feline

BREED

DSH

SEX

Female

AGE

6 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

St. Catharine's Animal
Hospital

REFERRING VET

Dr. Bekhit

INVOICE

51740

DATE

4-25-22

PRESENTING CLINICAL SIGNS

Ruptured large mammary mass at the last left mammary gland, the mass started one month ago and ruptured 3 days ago. Another small mas at the third right mammary gland. Indoor cat. Owner not sure Coco is spayed. No V/D/C eating OK.

Abnormal PE/Chem/CBC/UA Results: Bloodwork unremarkable

RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

Right/left lateral and ventrodorsal whole body views totaling 5 images available for review.

RADIOGRAPHIC FINDINGS

Thorax

The lungs are deeply inflated.

A mild amount of bilaterally symmetric pleural effusion is seen.

The lobar margins of the lung lobes are mildly retracted from the thoracic wall and mildly rounded. Multiple interstitial pulmonary nodules and multifocal peribronchial cuffing are seen.

The assessment of the cardiac silhouette is obscured owing to the presence of pleural effusion.

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

No evidence of a mediastinal mass effect is seen.

Abdomen

An irregular shaped soft tissue opaque mass is seen ventral of the ventral abdominal wall level with the last mammary complexes.

Multinodular subcutaneous soft tissue swelling and an enlarged mamil are seen ventral to the mid ventral abdominal wall.

The radiographic presentation of the gastrointestinal tract, liver, kidneys, and urinary bladder is within normal limits.

RADIOGRAPHIC DIAGNOSIS

- Mammary masses compatible with the history of mammary tumors
- Mild bilateral pleural effusion
- Multinodular interstitial lung pattern with peribronchial cuffing.



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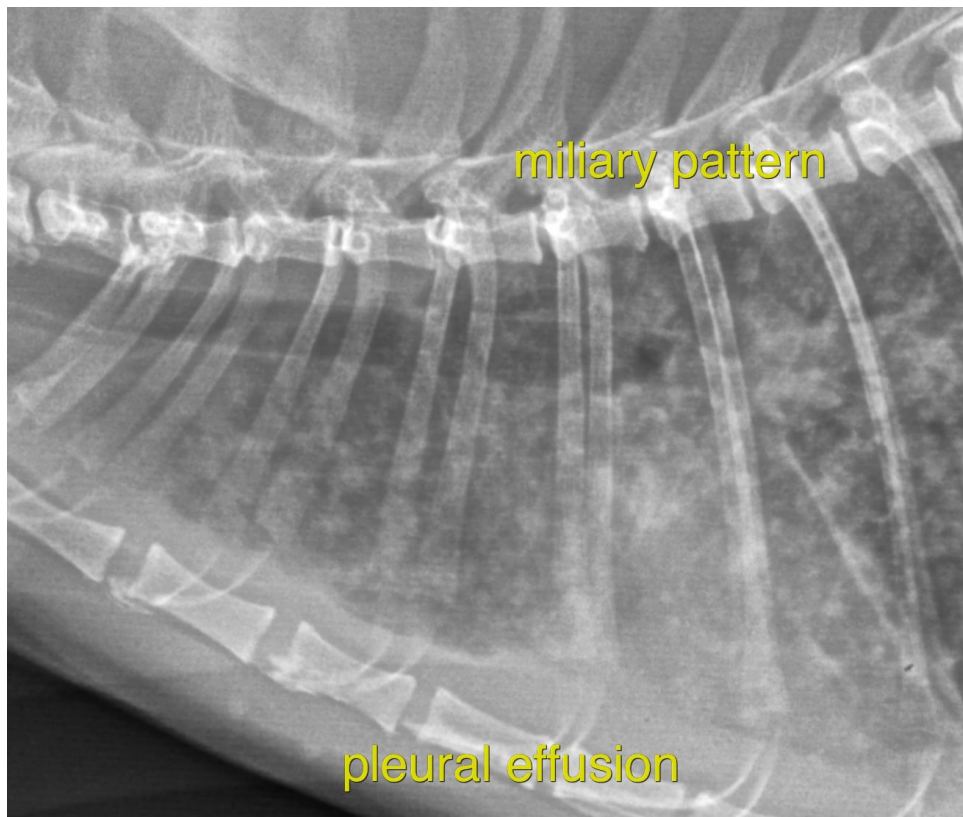
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Patient history and radiographic findings suggest potential for mammary tumor such as carcinoma. A multinodular / miliary lung pattern with mild bilaterally symmetric pleural effusion and peribronchial cuffing is noted and highly suggestive for pulmonary metastatic disease/ carcinomatosis. Granulomatous lung disease such as infectious or eosinophilic cannot be ruled out entirely as a differential diagnosis, however, is thought by far less likely in light of the remainder of the findings.





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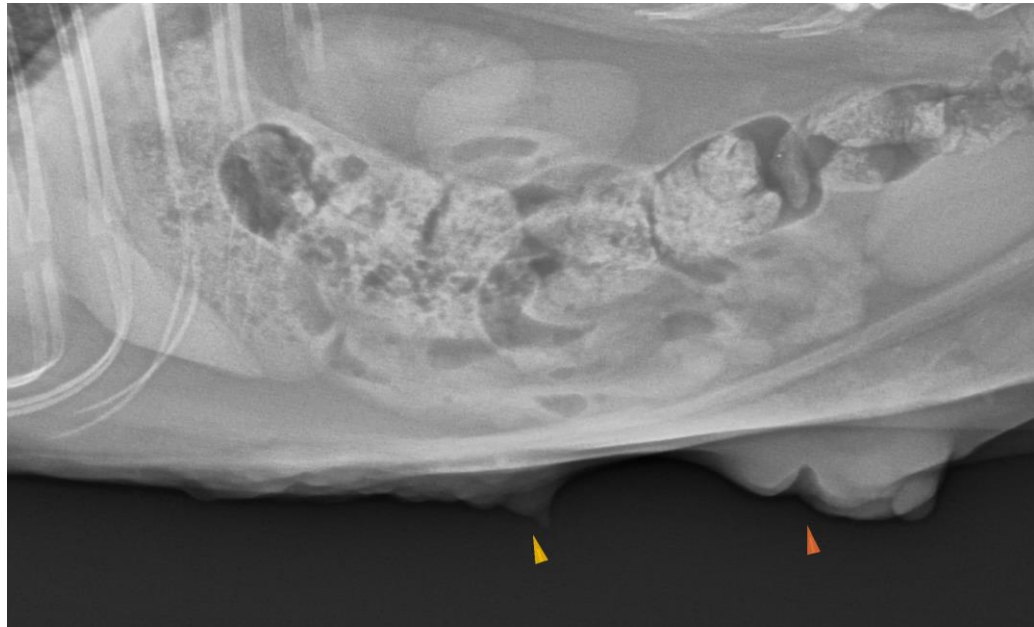
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley, DVM, Dr. med. vet., DipECVDI
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