



## PATIENT

Kobe Baez

## SPECIES

Canine

## BREED

French Bulldog

## SEX

M

## AGE

6Y

## WEIGHT

25lbs

## 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

74780

## DATE

4-27-26

## PRESENTING CLINICAL SIGNS

Kobe presented for an abdominal ultrasound to further evaluate multiple pulmonary masses identified on previous thoracic imaging, with prior cytology showing acute hemorrhage, pyogranulomatous inflammation, and mild epithelial atypia

## COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Plain and post contrast studies are available for review.

## COMPUTED TOMOGRAPHIC FINDINGS

Marked reduced body condition with cachexia is noted.

There appears to be a large volume of peritoneal effusion.

Severe diffuse bilateral pulmonary disease with extensive bilateral pulmonary masses which are ill-defined, bronchocentric in distribution, and cause marked bronchial compression. There is an extensive mass effect throughout both lung fields resulting in severe loss of normal aerated lung parenchyma.

Severe multifocal mediastinal lymphadenomegaly with mass like appearance is noted and associated leftward mediastinal shift.

Evidence of tumor invasion of the left subclavian vein is seen consistent with vascular encasement and invasion.

Bilateral symmetric periosteal new bone formation affecting both scapulae and humeri consistent with hypertrophic osteopathy (Marie's disease) is seen.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Severe mass like diffuse bilateral pulmonary disease.
- Severe mass like multiple mediastinal lymphadenomegaly.
- Vascular invasion of the left subclavian vein compatible with tumor invasion.
- Large volume peritoneal effusion.
- Hypertrophic osteopathy/Marie's disease involving bilateral forelimbs.

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The imaging findings are most consistent with a widely disseminated aggressive thoracic and systemic disease process with features most supportive of advanced malignant neoplasia which is considered highly likely with thoracic primary origin or metastatic disease, vascular invasion, massive pulmonary involvement, massive mediastinal nodal expansion, and hypertrophic osteopathy. Granulomatous disease would be unusual at this degree with vascular invasion and mass effect.

Targeted biopsy of pulmonary and/or mediastinal lesions can be considered if not already performed. Consider urgent oncology consultation. Prognosis unfortunately appears to be poor to grave.



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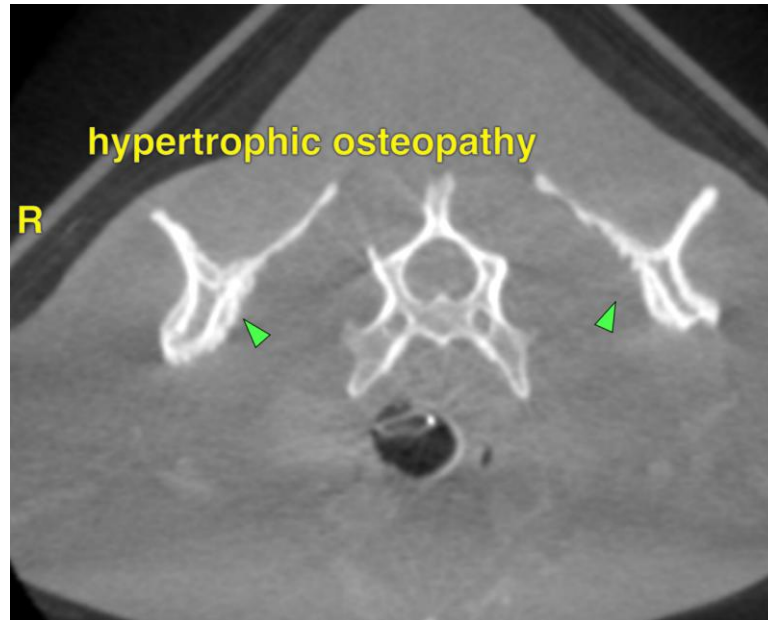
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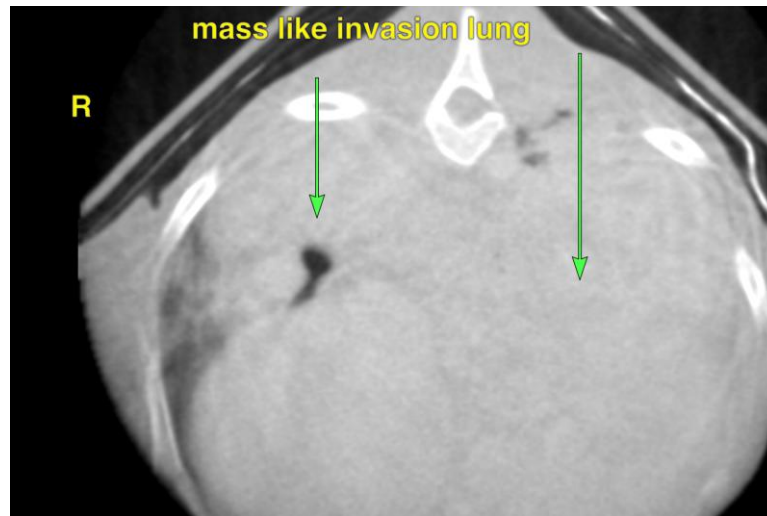
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
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)