



PATIENT

Olive Maloley

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

12 Years

WEIGHT

11.06 Pounds

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Sammy Williams

HOSPITAL NAME

Faith AC

REFERRING VET

Dr. Faith

INVOICE

35380

DATE

10/31/25

PRESENTING CLINICAL SIGNS

History: Patient presented for labored breathing, lethargy, weight loss, and decreased appetite Owner reports for the last month Olive has been gagging but not throwing anything up On exam:

Temperature normal Heart rate increased with gallop rhythm noted Respiratory rate was increased, using diaphragm Radiographs showed loss of detail around heart, increased opacity noted in cranial distal lung lobes, increased bronchointerstitial lung pattern, increased opacity in ventral chest as well Abnormal PE/Chem/CBC/UA Results: Attached recent bloodwork results

RADIOGRAPHIC STUDY OF THE THORAX

Radiographs of the thorax in two imaging planes are provided for review.

RADIOGRAPHIC FINDINGS

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

In the pleural cavity, a moderate amount of soft tissue opaque material is noted; the lung lobes are retracted from the thoracic wall by the soft tissue material and present a generalized decreased volume. The heart is effaced by the surrounding soft tissue material.

In the caudodorsal aspect of the right caudal lung lobe, an ill-defined soft, ovoidal shaped soft tissue mass with interspersed amorphous mineralization is seen. The lung parenchyma presents a generalized ground glass opacity

The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

RADIOGRAPHIC DIAGNOSIS

- Pulmonary soft tissue mass right caudal lung lobe with dystrophic mineralization
- Generalized unstructured interstitial lung pattern
- Pleural effusion

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are highly suggestive for primary pulmonary neoplasia – carcinoma is most likely – with paraneoplastic pleural effusion. Theoretically pulmonary granuloma and pyothorax are differentials, but the odds are low. Ultrasound guided FNA sampling of the pulmonary mass – using a dorsal intercostal approach – along with tapping the pleural effusion can be used for specification.



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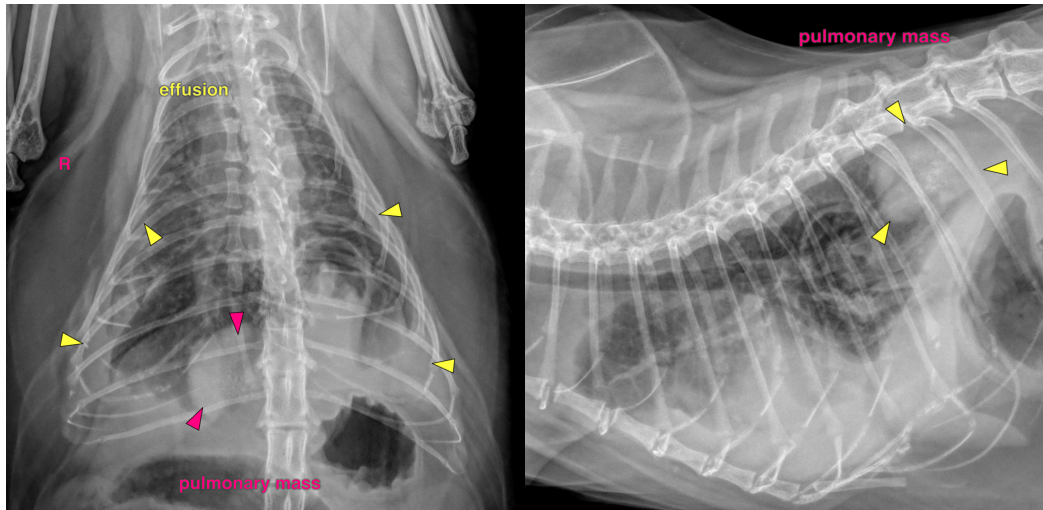
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com