



PATIENT

Bailey Smith

SPECIES

Canine

BREED

Goldendoodle

SEX

FS

AGE

13Y

WEIGHT

85lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Danielle Shemanski,
DVM, MA

HOSPITAL NAME

Western New York
Veterinary Services

REFERRING VET

Andrea Blitz, DVM

INVOICE

72709

DATE

11-20-25

PRESENTING CLINICAL SIGNS

Rdvm reason for referral: Lung mass in left caudal lung field on xray Abd ultrasound to rule out other masses clinical signs: no weight loss occasionally more lethargic belly appears bloated medications: none

Abnormal PE/Chem/CBC/UA Results: Not anemic at this time Bloodwork NSF

RADIOGRAPHIC STUDY OF THE THORAX

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

RADIOGRAPHIC FINDINGS

The body condition score is 8/9.

The surrounding bony structures are within normal limits.

Ventral the eh 5th/6th sternebra, a subcutaneous fat opaque convex shaped swelling is seen.

The heart is of normal size and shape; there is no evidence of cardiac chamber or vascular enlargement. The pulmonary vasculature is within normal limits.

The cranial mediastinum presents the expected soft tissue opacity. The mediastinal width is less than twice the width of the vertebral column at the same level.

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

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

Level with the 5th left intercostal space, a well-defined, soft tissue opaque nodule is seen in the image plane of the caudal part of the left cranial lung lobe; measuring 1.6 cm in diameter. The remainder of the lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

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

RADIOGRAPHIC DIAGNOSIS

- Solitary pulmonary soft tissue nodule caudal part left cranial lung lobe
- Obesity
- Suspect subcutaneous lipoma ventral thoracic wall

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The solitary pulmonary soft tissue nodule is concerning either for primary pulmonary neoplasia or metastatic lung disease; however, the diagnosis is not definitive and benign lesion such as pulmonary granuloma or pulmonary cyst. Ultrasound guided FNA sampling can be tried for specification – placing the patient in left lateral recumbency for 5 minutes prior to the ultrasound can help to increase visibility by inducing atelectasis of the overlying lung parenchyma.



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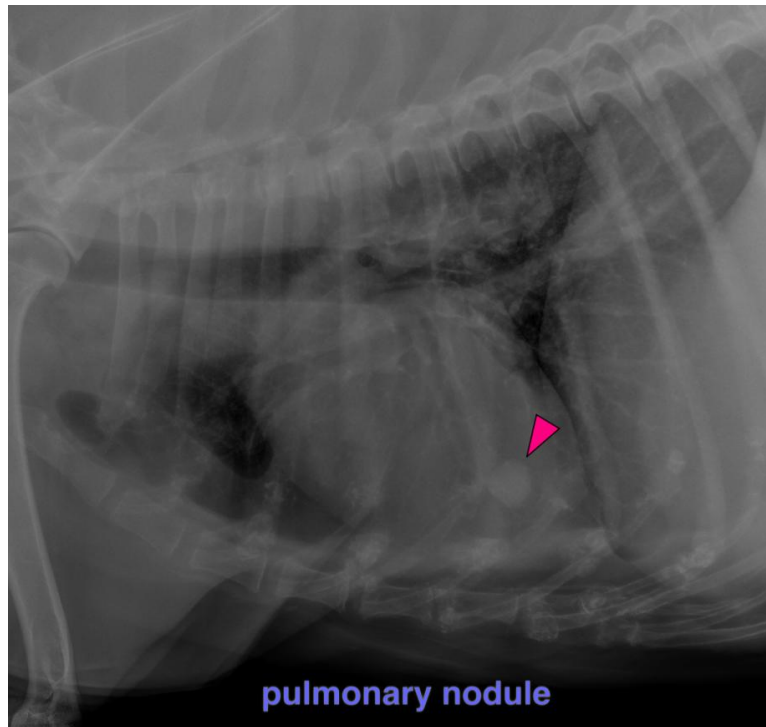
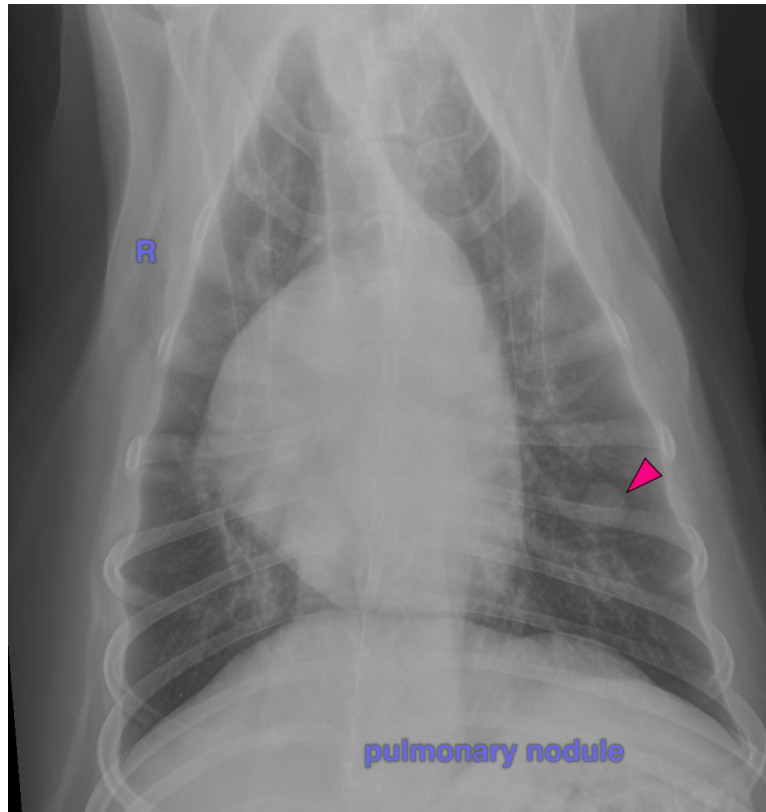
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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