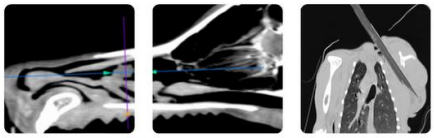

PATIENT

Mason Colvin

SPECIES

Canine

BREED

Weimaraner

SEX

MN

AGE

14Y

WEIGHT

65.8lbs

INTERPRETED BY

Tilde Rodrigues Froes, DMV, MSc., Dr. Med Vet., Dipl. CBraRVet

IMAGING PERFORMED BY

Katie Maher

HOSPITAL NAME

Maher Animal Hospital

REFERRING VET

Katie Maher

INVOICE

73113

DATE

12-23-25

PRESENTING CLINICAL SIGNS

Coughing of several month duration, primarily when he gets up from laying down, Treated previously twice with Baytril (once for UTI), with small improvement.
Abnormal PE/Chem/CBC/UA Results: CBC WNL Chem - BUN 30 no lung sounds heard today, but increased respiratory effort. no murmur today, though HR was elevated at 130-140

RADIOGRAPHIC STUDY OF THE THORAX

Thoracic radiographs obtained in two imaging planes are provided for review, totaling four projections: one right lateral, one left lateral, one ventrodorsal, and one dorsoventral view.

RADIOGRAPHIC FINDINGS

A large, rounded, partially marginated soft tissue opacity mass effect is identified within the right caudal lung lobe, measuring at least 9.9 × 7.3 cm. The lesion is predominantly dorsal and located in close proximity to the thoracic wall, centered at the level of the 7th to 8th intercostal spaces. In addition, a diffuse mixed pulmonary pattern is present, characterized by an interstitial–bronchial pattern with multifocal, faint alveolar components.

The thoracic trachea and esophagus are unremarkable.

The cardiac silhouette is within normal limits in size, shape, and contour, with a vertebral heart score of 10.0, which is within the normal reference range.

The pulmonary vasculature is normal in size and distribution.

Pleural fissure lines are visible on the lateral projections.

The mediastinum and diaphragm are within normal limits.

Within the cranial abdomen, two small mineral opaque foci are superimposed over the hepatic silhouette.

No significant abnormalities are identified in the collimated visualized osseous structures.

RADIOGRAPHIC DIAGNOSIS

- A large, rounded, partially marginated soft tissue opacity mass effect is identified within the right caudal lung lobe, associated with a diffuse mixed pulmonary pattern. Differential diagnosis includes a primary pulmonary mass, possible infiltrative metastatic disease, and/or concurrent secondary inflammatory changes such as pneumonitis.
- Pleural fissure lines are visible. Differential diagnosis includes minimal pleural effusion or pleuritis.
- Mineral opacities are visible superimposed over the hepatic silhouette. Differential diagnosis includes cholelithiasis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic examination demonstrates a large mass effect within the right caudal lung lobe, raising strong concern for a primary pulmonary neoplasm, such as pulmonary adenocarcinoma,

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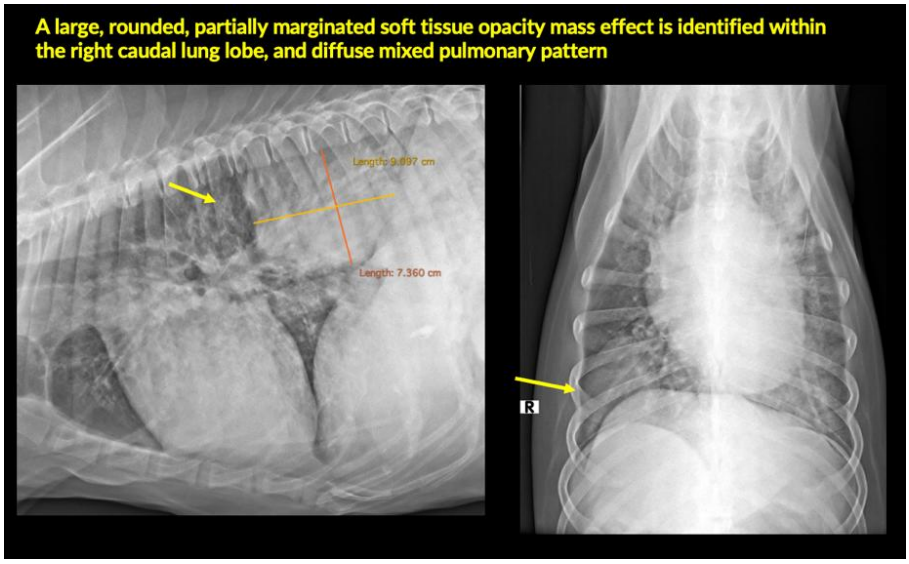
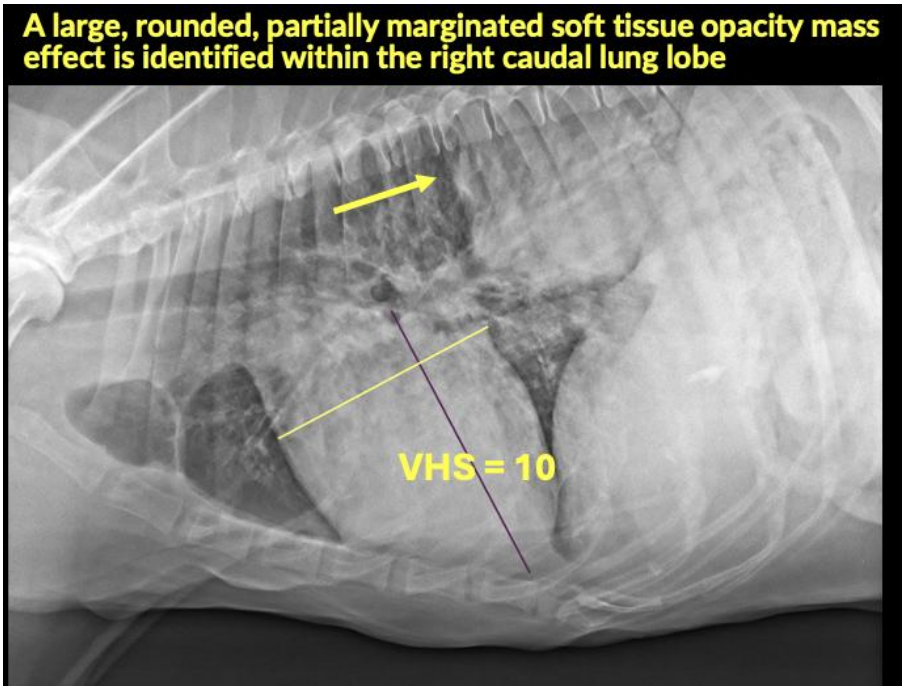
pulmonary squamous cell carcinoma, pulmonary bronchioalveolar carcinoma, or lymphoma. Granulomatous disease is considered a less likely differential diagnosis. The concurrent diffuse pulmonary pattern may reflect metastatic spread, inflammatory changes, or a reactive process.

Thoracic ultrasound–guided fine-needle aspiration or bronchoalveolar lavage is suggested. Given the location of the mass and its close proximity to the thoracic wall, percutaneous sampling appears technically feasible.





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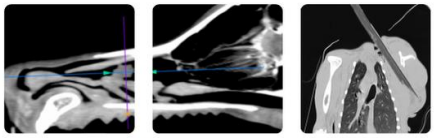

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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Tilde Rodrigues Froes, DMV, MSc., Dr. Med.Vet., Dipl.CBraRVet
info@sonopath.com