



PATIENT

Milo Mieloni

SPECIES

Canine

BREED

Pit Bull X

SEX

M

AGE

13Y, 6M, 28D

WEIGHT

19.5kg

INTERPRETED BY

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

IMAGING PERFORMED BY

AMC

HOSPITAL NAME

Green Dog Dental and
Wellness

REFERRING VET

Dr. Geist

INVOICE

74115

DATE

3-10-26

PRESENTING CLINICAL SIGNS

- Patient presented for recheck of Chronic Kidney Disease stage 3; owner reports the patient has appeared more anxious recently. The patient is currently receiving a home-cooked diet formulated to be low in protein and phosphorus.
- On physical examination, a 3 × 4 cm firm, mobile mass was palpated in the left cervical region consistent with the thyroid area. Findings are suspicious for a possible Thyroid Carcinoma.

RADIOGRAPHIC STUDY OF THE THORAX

Orthogonal thoracic radiographs are available for review, totaling three projections. One ventrodorsal (VD) view. One right lateral view. One left lateral view

RADIOGRAPHIC FINDINGS

THORAX

A semicircular soft-tissue opaque membrane is superimposed over the caudal cervical portion of the trachea, most consistent with an incidental redundant tracheal membrane. The intrathoracic trachea appears within normal limits.

The esophagus is unremarkable.

There is mild diffuse unstructured pulmonary opacity, most evident on the lateral projections, associated with suboptimal inspiratory phase (subinspiration).

There is no radiographic evidence of pulmonary nodules or mass lesions.

The pulmonary vessels are within normal limits.

The cardiac silhouette spans approximately 50% of the thoracic width, measuring 2.5 intercostal spaces. The vertebral heart score (VHS) is 9.8, which is within normal limits. The shape and contour of the cardiac silhouette are normal.

The pleural space and mediastinum appear normal.

The ribs, diaphragm, and thoracic wall are within normal limits.

Bilateral periarticular osteophytes are present at the humeral heads, consistent with degenerative joint disease.

RADIOGRAPHIC DIAGNOSIS

- Mild diffuse unstructured pulmonary opacity, most evident on the lateral projections. The primary differential diagnosis is an artifactual increase in pulmonary opacity related to suboptimal inspiration.
- No radiographic evidence of pulmonary nodules or pulmonary masses.
- The bilateral humeral head periarticular osteophytes are compatible with degenerative joint disease and are considered incidental findings.



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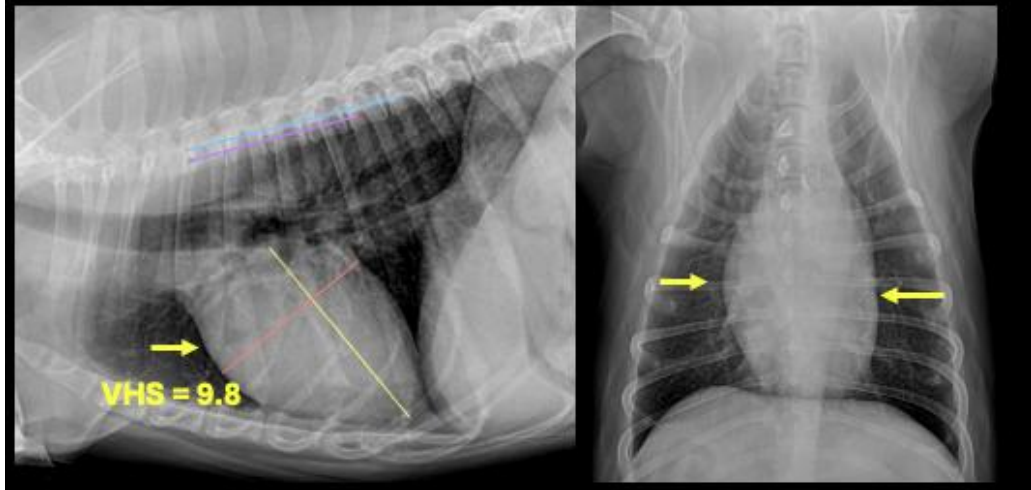
3-10-26

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

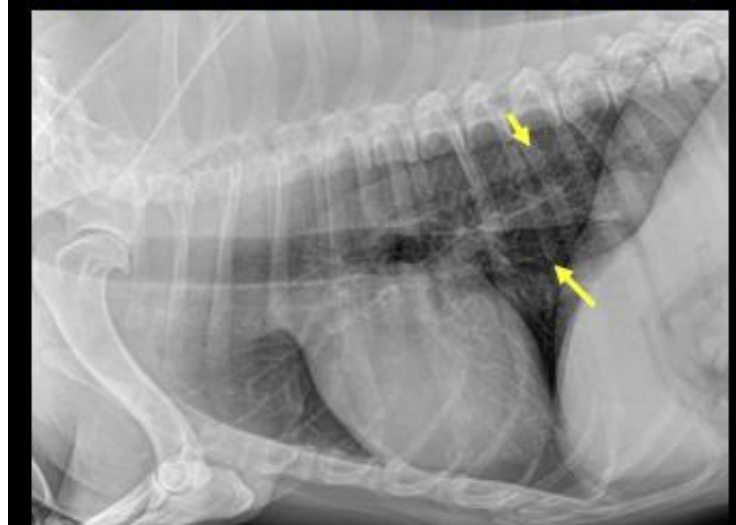
Thoracic radiographs do not demonstrate evidence of pulmonary nodules or masses.

The mild diffuse pulmonary opacity is most likely related to suboptimal inspiratory effort during image acquisition. However, early nonspecific interstitial pulmonary disease cannot be completely excluded. Less likely differential diagnoses include early interstitial pneumonitis, early uremic pneumonitis considering the patient's history of chronic kidney disease, and early-stage non-cardiogenic pulmonary edema. Correlation with the presence of respiratory clinical signs is recommended for better characterization of the pulmonary findings.

Normal cardiac silhouette. No evidence of pulmonary nodules or masses.



Mild diffuse unstructured pulmonary opacity





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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