



## PATIENT

Bou Murata

## SPECIES

Feline

## BREED

DSH

## SEX

Male Neutered

## AGE

8M

## WEIGHT

10.3lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Abina Glennon

## HOSPITAL NAME

New Bridge Veterinary  
Practice

## REFERRING VET

Dr. Abina Glennon

## INVOICE

74628

## DATE

4-16-26

## PRESENTING CLINICAL SIGNS

Acute onset of open mouth breathing after running around after an insect.  
mucous membranes pink

## RADIOGRAPHIC STUDY OF THE THORAX

Single lateral thoracic radiographic projection provided for evaluation.

## RADIOGRAPHIC FINDINGS

Partial effacement of the ventral margin of the cardiac silhouette is present. A discrete pleural fissure line is visible in the cranial thorax.

The pulmonary parenchyma is within normal limits in opacity, with no evidence of focal alveolar or interstitial disease.

The trachea is normal in diameter and position.

The diaphragm and cranial mediastinum are unremarkable.

The cardiac silhouette is otherwise unremarkable in size and shape, within the limitations of a single projection and partial ventral obliteration.

The sternum, ribs, and visible musculoskeletal structures are within normal limits.

## RADIOGRAPHIC DIAGNOSIS

- Partial ventral border effacement of the cardiac silhouette combined with a visible pleural fissure line. Primary differential diagnoses include small volume pleural effusion.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The partial ventral border effacement of the cardiac silhouette combined with a visible pleural fissure line supports the presence of a small volume of pleural fluid.

Thoracic ultrasound (TFAST) is recommended to confirm and characterize pleural fluid amount and to guide potential thoracocentesis if clinically indicated.

The possible etiopathogenic factors for the pleural effusion identified in young cats include feline infectious peritonitis (FIP), pyothorax, and less likely idiopathic or traumatic chylothorax. Clinical correlation, T-FAST guided thoracocentesis with fluid analysis, and additional diagnostics are recommended to determine the underlying etiology.



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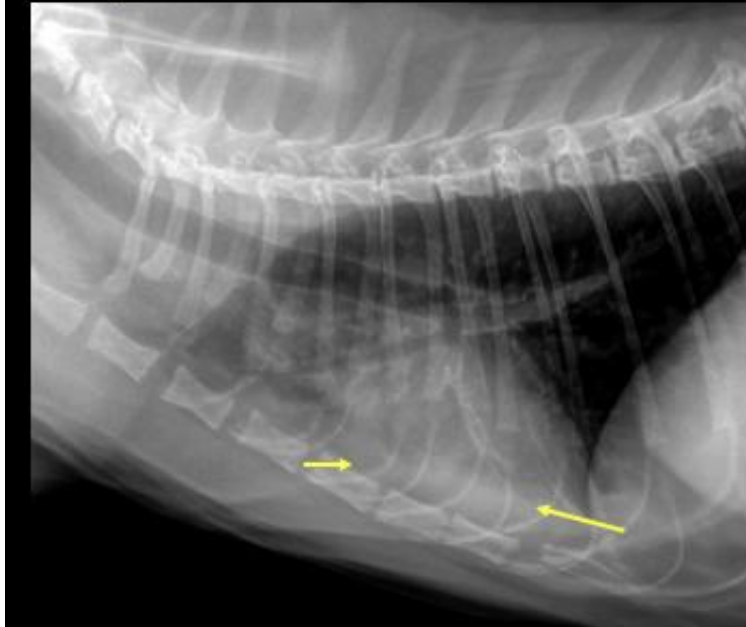
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**Partial ventral cardiac silhouette effacement. DDX:  
scant pleural effusion.**



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**  
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