



PATIENT

Aeris Robertson

SPECIES

Feline

BREED

DSH

SEX

Female Spayed

AGE

12Y

WEIGHT

4.2kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Mountain West
Veterinary Specialists

HOSPITAL NAME

Mountain West
Veterinary Specialists

REFERRING VET

Melanie Thompson

INVOICE

75164

DATE

5-27-26

PRESENTING CLINICAL SIGNS

Checking for Mets -

Aeris has a history of a recurrent pleomorphic sarcoma. The initial mass was excised from the left lateral stifle in February 2025, with histopathology revealing a Grade III soft tissue sarcoma with narrow margins. A recurrence was noted by the owner at the beginning of 2026. On 04/08/2026, a recurrent stifle mass and a new caudal abdominal mass were surgically excised. Histopathology confirmed pleomorphic sarcoma at both sites; the stifle mass had incomplete margins, while the abdominal mass had complete margins. An oncology consultation on 04/29/2026 at MedVet found the surgical sites to be healing well, but palpation of the abdomen revealed diffuse lobular thickening of deeper tissues. A fine needle aspirate of this area was consistent with inflammation and steatitis, with no malignant cells seen. Recommendations included staging (blood work, chest x-rays, abdominal ultrasound) and discussion of further treatment options such as additional surgery, radiation, and/or chemotherapy due to the high risk of local recurrence and distant metastasis.

RADIOGRAPHIC STUDY OF THE THORAX

Orthogonal views of the whole-body are provided for review totaling three images. One ventrodorsal view. One right lateral view. One left lateral view.

RADIOGRAPHIC FINDINGS

THORAX

The trachea is normal in position and diameter.

Pulmonary parenchyma is within normal radiographic limits. No pulmonary soft tissue nodules, masses, or focal pulmonary infiltrates are identified.

Pulmonary vessels are within normal limits in size and distribution.

Cardiac silhouette is within normal size and shape limits (VHS approximately 8.0, normal range).

The pleural space, mediastinum, and diaphragm are unremarkable.

Mild degenerative changes are present involving the sternbrae.

No evidence of thoracic wall abnormality is identified radiographically.

Within the included cranial abdomen, the left kidney is subjectively smaller than the right kidney.

Incomplete bridging spondylosis deformans is present at L7 - S1.

Mild increased soft tissue volume is present within the ventrocaudal abdominal/inguinal subcutaneous tissues.

Mild external artifact related to wet hair is superimposed over portions of the study.



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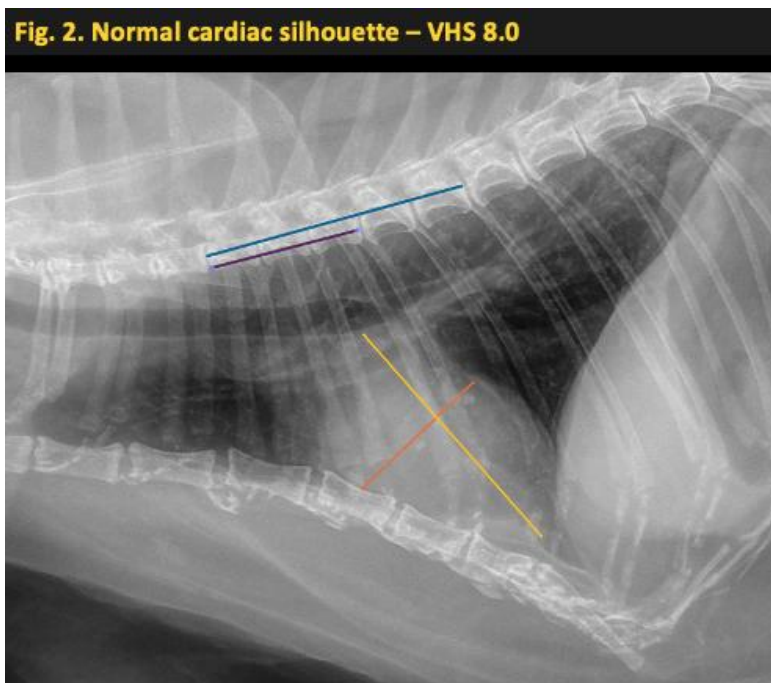
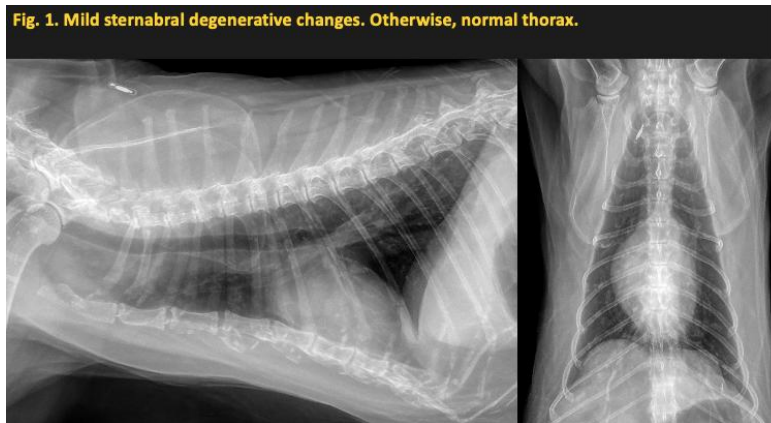
RADIOGRAPHIC DIAGNOSIS

- No radiographic evidence of pulmonary metastatic disease.
- Mild asymmetric renal size, with the left kidney smaller than the right.
- Mild ventrocaudal abdominal/inguinal soft tissue thickening.
- Mild degenerative spondylosis deformans at L7-S1 and mild sternbral degenerative change.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No radiographic evidence of thoracic metastatic disease is identified at this time.

The mild ventrocaudal abdominal/inguinal soft tissue thickening may correspond to postoperative or inflammatory soft tissue change and should be interpreted in conjunction with physical examination findings and prior surgical history.





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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