



PATIENT

Ella Gordon

SPECIES

Canine

BREED

French Bulldog

SEX

FS

AGE

4Y

WEIGHT

11.5

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

IMAGING PERFORMED BY

EH

HOSPITAL NAME

Crown Veterinary
Specialists and Associates

REFERRING VET

Dr Allison Szarejko

INVOICE

73161

DATE

12-30-25

PRESENTING CLINICAL SIGNS

Ella is a 4 year old, female spayed French Bulldog that was presented to the Crown Emergency Service with a 1 day history of vomiting, anorexia, and right forelimb swelling. Back on 12/1, Ella presented to her primary veterinarian and was transferred to BluePearl Levittown for oral ulceration. She was started on sucralfate, clindamycin, and carprofen. About 1 week ago, she began to act off/lethargic. She was rechecked at her primary veterinarian on 12/23, which showed persistent oral ulceration. Over the last week, Ella has stopped drinking and would only eat very slowly. Last night, she vomited after eating, and has not eaten since. Last night, she also started limping on her right front limb, and this morning it is very swollen.

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD, THORAX, & THORACIC LIMBS

Plain and post contrast studies are available for review. Study is R/L flipped.

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

Mild diffuse esophageal wall thickening appears to be present in the caudal thoracic esophagus with no evidence of dilation, mass effect, or abnormal content.

A 2mm sized, single, small focal area of interstitial consolidation is present in the caudodorsal aspect of the right cranial lung lobe. The remaining lung parenchyma appears within normal limits.

The mediastinal lymph nodes and heart are unremarkable.

Multiple thoracic hemivertebrae are seen. There is no evidence of significant vertebral canal stenosis.

Right Forelimb

Generalized subcutaneous and interfascial soft tissue swelling of the right thoracic limb is seen extending from the elbow distally. Discrete foreign material or osseous/articular injury are not identified.

Mild symmetric enlargement of the right axillary and right cervical lymph nodes is noted.

A multipartite axial sesamoid bone of the 5th metacarpal phalangeal joint is noted in the right front limb and considered unrelated to the soft tissue swelling.

Head

The patient has a brachycephalic skull conformation.

The brain presents no deviation from normal anatomy and symmetry. The grey and white matter distinction and the neuroparenchymal attenuation are as expected. The distribution of contrast enhancement is within normal limits throughout the parenchyma and meninges. The ventricular system is non-dilated and within the limits of the expected volume and symmetry.

Thin and smoothly folded conchae and turbinates with even smooth mucosal lining. The osseous lining of the nasal cavities is intact.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.



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Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external auditory meatuses present within normal limits.

Mild enlargement of the right retropharyngeal lymph node is noted.

The salivary glands present within normal limits.

Significant dental changes are not seen, other than the dental crowding typical in brachycephalic dogs.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Suspect right forelimb phlegmon with regional reactive lymphadenopathy.
- Mild focal interstitial pulmonary consolidation.
- Incidental multipartite medial metacarpophalangeal sesamoid bone right front paw.
- Suspect esophagitis.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The soft tissue swelling of the right front limb is suggestive of a phlegmon. No foreign material was identified making penetrating injury less likely, though trauma cannot be fully excluded. The regional lymphadenopathy likely represents a reactive response.

The mild focal pulmonary interstitial change is nonspecific and could represent scar tissue/fibrosis, early inflammation, and less likely an interstitial nodule. No other significant bronchopulmonary changes are seen.

Breed-related brachycephalic features are present.

No significant dental changes are noted.

Correlate clinically with limb swelling. Monitor for progression or development of abscess. Surgical treatment could be considered. Supportive care and possible anti-inflammatory or antibiotic therapy can be performed if indicated. Consider follow up ultrasound and aspiration of potential fluid if swelling does not resolve.

Monitoring of pulmonary changes is recommended, especially if respiratory signs develop.



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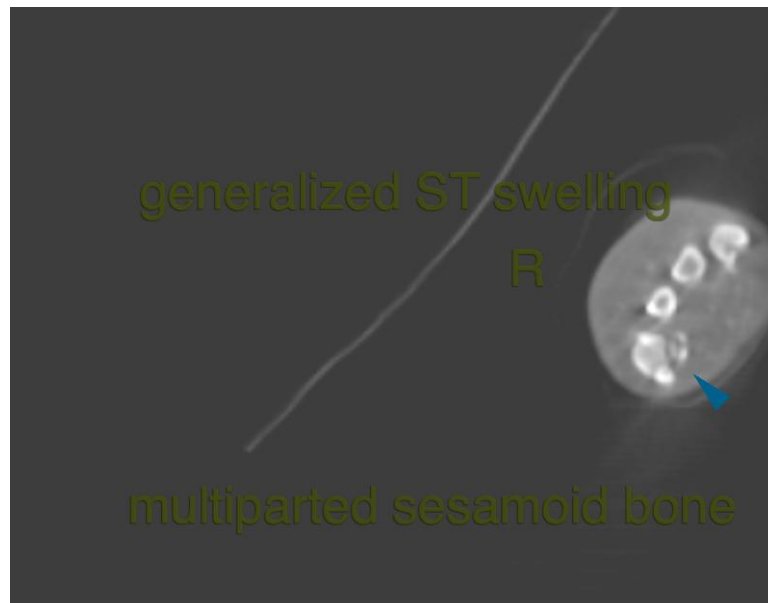
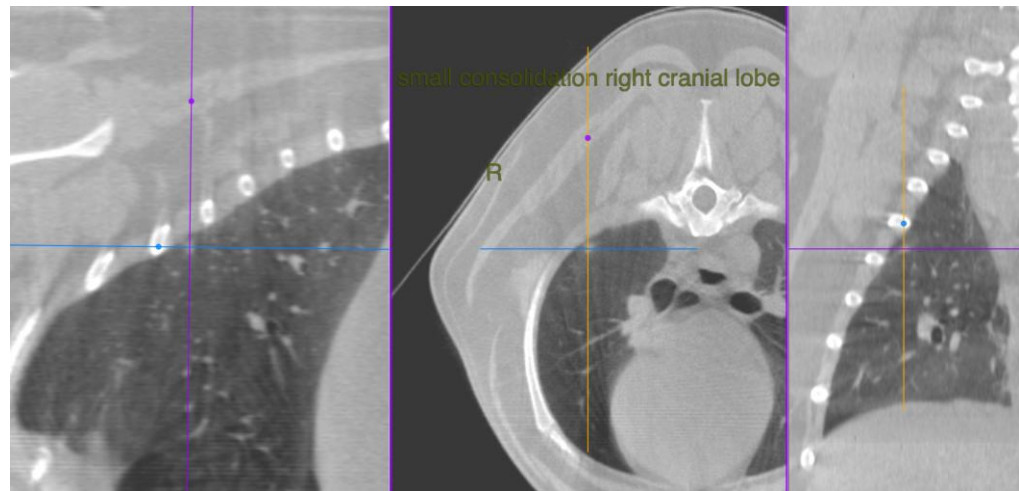
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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