



PATIENT PRESENTING CLINICAL SIGNS

Peg Kinzel P has had low appetite since 2/3/22, very lethargic, drinking less water than normal, hypersal, intermittent coughing, no sneezing, no V/D, throat appeared inflamed on rads per rDVM, fever of 103.7 on 2/5 (2/8 fever 103.3), weight loss, O reports discomfort on palpation of throat. Currently taking Sucralfate and Doxycycline. P had gastropexy performed 9/2021. Abnormal PE/Chem/CBC/UA Results: 2/5- leukocytosis 23k, neutrophilia 20.55K, HCT 48%

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

BREED

Plain and post contrast studies as well as a delayed post-contrast study available for review.

German Shepherd

Limited study owing to multiple beam hardening streaks emanating from the mandibular angles as well as the tracheal tube. The soft tissue reconstruction algorithm of the plain and immediate post-contrast study unfortunately appears to enhance the image blur.

SEX

Female

COMPUTED TOMOGRAPHIC FINDINGS

There is severe enlargement of the left medial retropharyngeal lymph node. The lymph node measures approximately 6.0 x 3.0 cm. Increased contrast enhancement and a contrast sparing cavity are seen in the cranial aspect of the lymph node. There appears to be peripheral fat stranding. The left submandibular lymph nodes are moderately enlarged. Mild enlargement of the right retropharyngeal and submandibular lymph nodes is seen. No evidence of foreign material is seen.

AGE

1 Year

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The dentition is incomplete. The triadan 206 is absent. The remainder of the dentition presents within the expected age related limits.

COMPUTED TOMOGRAPHIC DIAGNOSIS

HOSPITAL NAME

Wilvet Salem

- Severe left medial retropharyngeal lymphadenomegaly with cavitation and peripheral cellulitis.
- Mild to moderate left and right submandibular lymphadenomegaly.
- Mild right retropharyngeal lymphadenomegaly.
- No evidence of significant dental disease.

REFERRING VET

Dr. Crystal Ebert

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings strongly support the presence of abscessation of the left medial retropharyngeal lymph node. Other causes of lymphadenitis and tumoral necrosis are thought by far less likely. Final diagnosis can be obtained by means of sampling of both the tissue components as well as the cavity of the lymph node which could be obtained under ultrasonographic guidance. The mild to moderate enlargement of the remainder of the regional lymph nodes supports the presence of regional lymphadenitis.

INVOICE

50159

DATE

2-9-22



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REFERRING VET

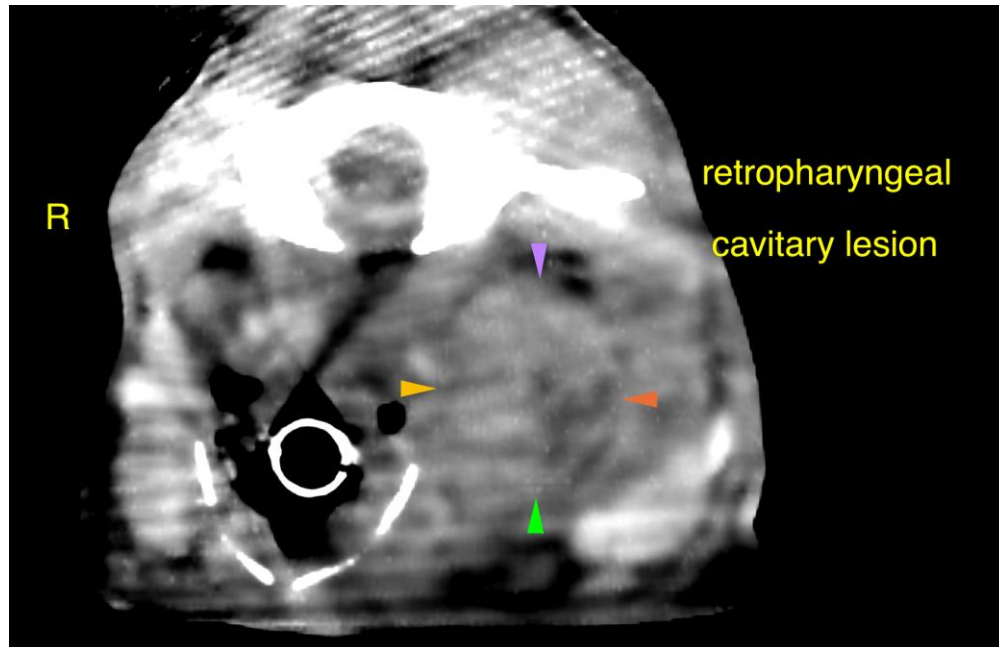
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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