



PATIENT

Shamia Jarret

PRESENTING CLINICAL SIGNS

Routine Check-up; History of kidney stones. Has also lost previous siblings to FeLV so want to ensure no enlarged lymph nodes, etc. Previous CT Scan Findings (12/15/20) • Suspect metaplasia medial segment of the left triceps tendon • Stationary mild bronchial pattern • Stationary nephrolithiasis without evidence of obstruction • Multiple regions of dystelectasis, suspect secondary to general anesthesia • Mild chronic nephropathy bilaterally • Chondroid disc degeneration caudal lumbar spine • Spondylosis deformans • Structural normal skull
Abnormal PE/Chem/CBC/UA Results: sedated by rDVM prior to arrival

SPECIES

Feline

BREED

Savannah

COMPUTED TOMOGRAPHIC FINDINGS

Head/neck:

SEX

Female Spayed

The neurocranium shows normal findings. Bony structures of the skull and the skull foramina of the cranial nerves are laterally symmetrical and inconspicuous. Both tympanic bullae are completely ventilated with a regular tympanic bulla wall. External ear canals are ventilated in all sections, walls of the external ear canals, the adjacent temporomandibular joints and the nasopharyngeal meatus have no particular findings.

AGE

11 Years

Frontal sinuses and the orbital contents are laterally symmetrical without evidence of a retrobulbar lesion. Nasal cavities present swelling of the mucous membranes but are ventilated. Conches look normal as well as the maxillary/mandibular teeth.

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet
Specialist in
Diagnostic Imaging

Post contrast images show no pathological enhancement. Soft tissues of the head and neck are symmetrical and of homogeneous density, especially the medial retropharyngeal lymph nodes.

Thorax:

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The lungs are regularly ventilated with close contact to the inner thoracic wall on all sides. There is no evidence of pleural thickening, fluid accumulation or free pleural gas. Pulmonary density presents a mild broncho-interstitial pattern. There is no evidence of focal or nodular pulmonary lesions.

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The mediastinum is regular in width and density. Mediastinal (sternal, tracheal-, bronchial) lymph nodes are considered to be normal. The thoracic trachea and esophagus present as expected. The diaphragm appears normal.

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Spine:

There are multiple but age-appropriate degenerative changes of the spine recognized including degeneration of the intervertebral discs and formation of ventral spondylosis. A compressive lesion of the spinal cord equine cauda is not recognized.

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1-18-22

Abdomen:

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The liver shows normal findings in terms of size, surface, shape and contrast behavior. The gallbladder is inconspicuous without evidence of cholestasis. The common bile duct is considered to be normal. The pancreas presents normal size and shape with a smooth surface. The peripancreatic fat tissue and omentum are inconspicuous.

SPECIES

Feline

The spleen appears enlarged with transverse diameters of 1.91 cm but without evidence of nodular/focal lesions. The current CT shows a regular contrast behavior.

BREED

Savannah

Both kidneys show a mildly irregular surface, mild renal calcification is noted, pelvic calculi may silhouette with the contrast medium. The left kidney measures 4.70 cm, the right 4.50 cm in length. Adrenal glands are in normal limits.

SEX

Female Spayed

As far as can be assessed, the stomach and all parts of intestine are regularly presented without any indication of a wall thickening or a mass. There are no signs of an obstructive or functional ileus.

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Ureters, urinary bladder, trigonum and urethra are presented as expected. There is no evidence of cystic calculi.

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Abdominal lymph nodes and abdominal vessels have no particular findings. Signs of peritoneal/retroperitoneal effusion or free gas are not recognized.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Normal CT findings of the head/spine, thorax and the abdomen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The current CT likely represents constant and age-appropriate findings (signs of a mild/chronic bronchitis/bronchopneumonia, obesity, splenomegaly due to anesthesia, chronic and bilateral structural nephrosis, suspected renal calcification, degenerative changes spine). Overt signs of an active inflammatory or even neoplastic process are missing.

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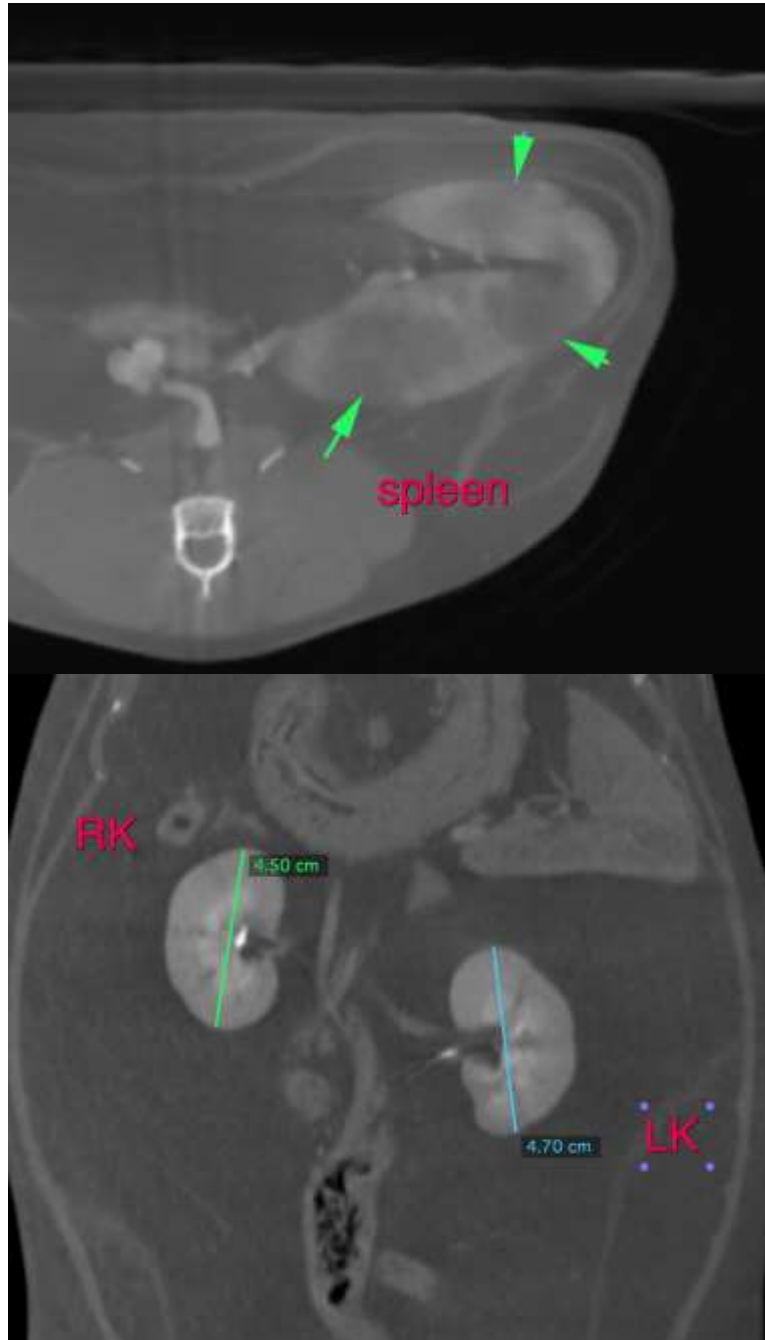
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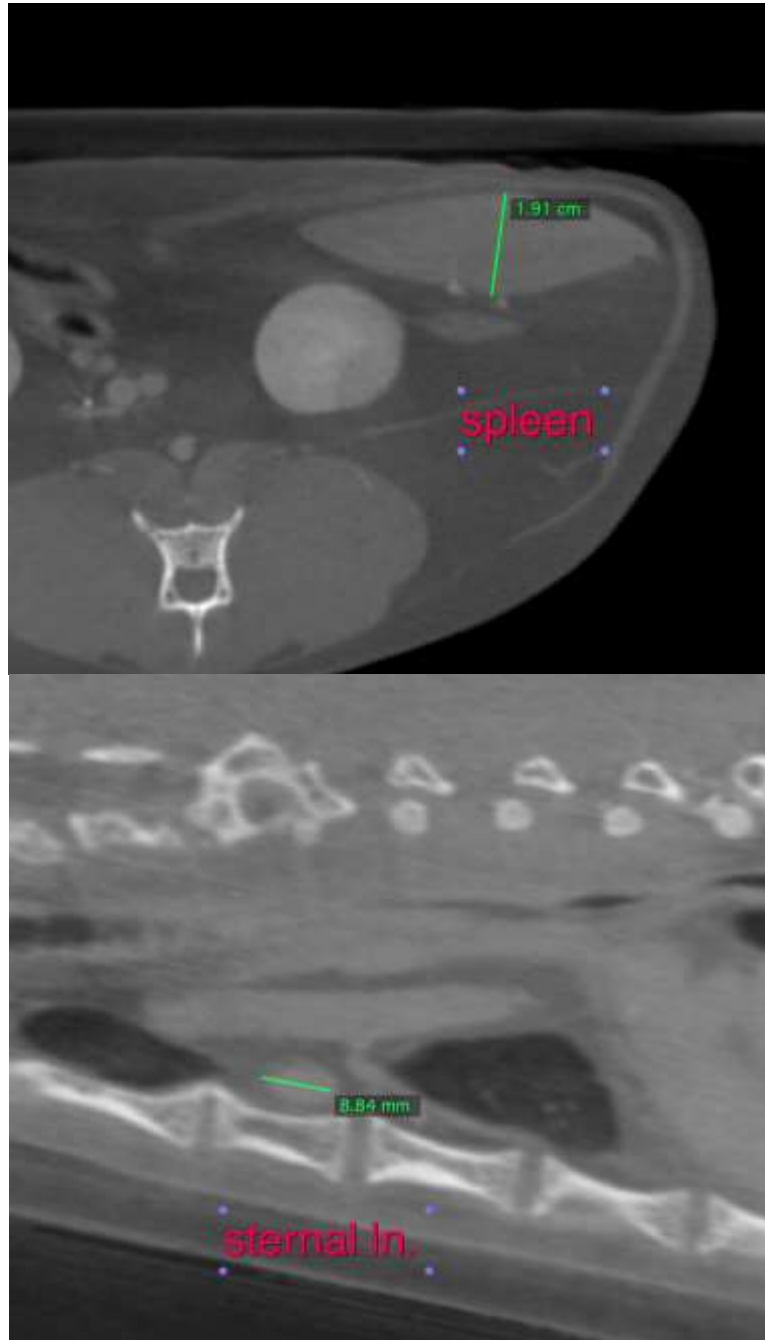
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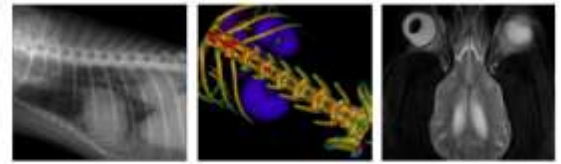
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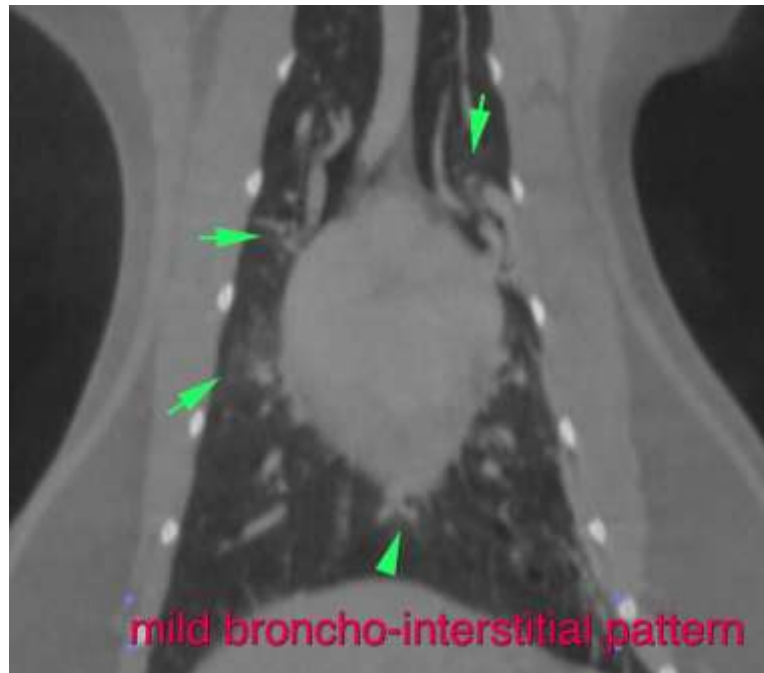
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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