



PATIENT

Roxy Fyfe

SPECIES

Canine

BREED

Mixed

SEX

Spayed Female

AGE

11

WEIGHT

20

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet Specialist
in Diagnostic Imaging

IMAGING PERFORMED BY

Dr. Eamon

HOSPITAL NAME

Belconnen Veterinary
Centre

REFERRING VET

Dr. Eamon

INVOICE

12276

DATE

11/13/25

PRESENTING CLINICAL SIGNS

Swelling left hind leg - aspirated RBC only right eye third eye lid protruding, eye sunken - nerve function normal

Abnormal PE/Chem/CBC/UA Results: CBC/chem/coags WL

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD, ABDOMEN & PELVIS

Head/abdomen/pelvis, pre/post contrast

COMPUTED TOMOGRAPHIC FINDINGS

The bony structures of the skull are inconspicuous. Signs of an aggressive lesion are not noted. The orbital cavities are bilaterally symmetrical without inflammatory or neoplastic changes. The eye bulbs are inconspicuous. The retrobulbar region is unremarkable on both sides. The neurocranium shows normal findings. The soft tissues of the head and neck present an incidental, subcutaneous bump of 0.6 cm caudal to the head on the right side. The spine presents mild degenerative findings with mild disc protrusion at the level of L6-7. The equine cauda gets mildly deviated dorsally without relevant compression. A mild ventral spondylosis is noted at the level of L7-S1. The paraspinal soft tissues are inconspicuous and symmetrical.

Both coxo-femoral joints present normal findings.

The left medial musculature of the thigh presents a swelling with an inhomogeneous contrast enhancement and significant increase of the muscle volume. The tributary lymph nodes in the inguinal region at the aortic trifurcation are inconspicuous.

The chest is inconspicuous. Relevant nodular, focal or diffuse pulmonary changes are not noted. The mediastinum is normal, pleural effusion is not recognized. The thoracic borders are intact including the diaphragm.

There is incidental, mineral dense gallbladder sludge noted. Cholestasis is not obvious; the peripheral fat tissue and liver parts are unremarkable. There is no evidence of an active inflammatory or neoplastic process within the abdomen. The great abdominal vessels are inconspicuous, as well as the abdominal lymph nodes.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Normal findings of the head
- Mild degenerative findings of the spine/lumbosacral transition, s. above
- Muscular lesion left quadriceps muscle (rectus femoris)

Incidental findings:

- Subcutaneous bump right side caudal to the head
- Mineral dense gallbladder sludge

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS



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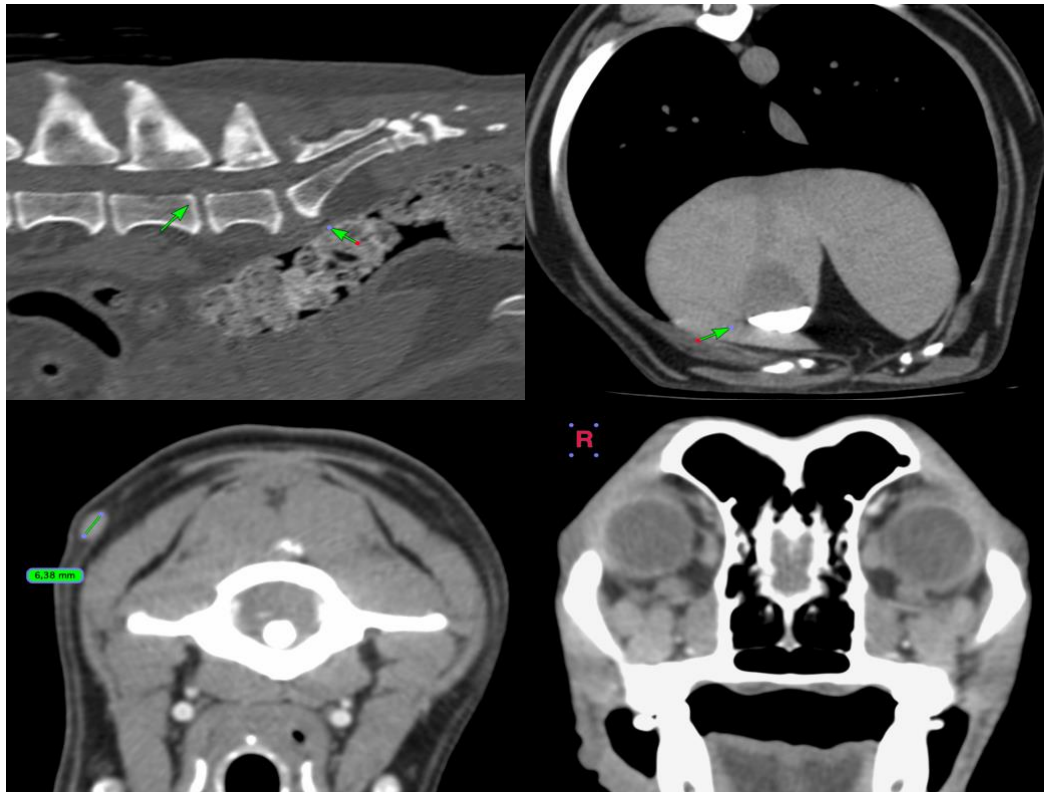
11/13/25

The CT findings of the left thigh musculature are unspecific. The increased volume and the inhomogeneous contrast uptake are suspicious for a neoplastic lesion. An inflammatory process as seen with initial abscess formation and/or post-traumatic changes as seen with hemorrhage are not fully excluded. Since the aspirate is not conclusive, ultrasound-guided biopsy and histopathology could be performed next.

The right orbit and eye bulb are inconspicuous and do not show particular findings. This does not exclude inflammatory changes and/or neurologic disorders. The small subcutaneous bump on the right side caudal to the head could represent atheroma and/or another soft tissue dense neoplasia. These findings must be correlated with the clinical presentation and the temporal course. FNA and biopsy could be performed next.

The mild degenerative findings of the spine are likely not relevant. An aggressive lesion at the level of the bony structures is not noted.

The abdominal cavity presents normal findings except for the gallbladder sludge. Relevant cholecystitis and/or cholestasis are not noted.





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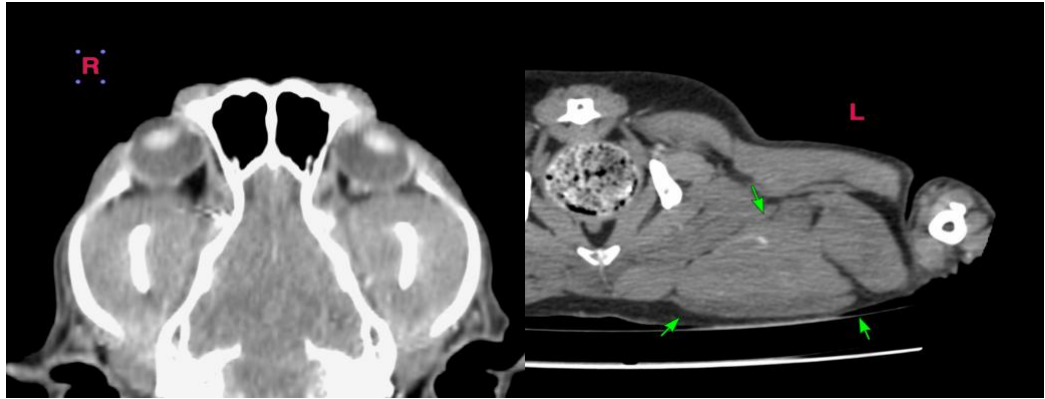
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
info@sonopath.com