



PATIENT

Linus Shuford

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

7 Years

WEIGHT

12.8 Pounds

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet Specialist
in Diagnostic Imaging

IMAGING PERFORMED BY

Rosio Castaneda

HOSPITAL NAME

Scottsdale VC

REFERRING VET

Dr. D'Monte

INVOICE

36008

DATE

12/20/25

PRESENTING CLINICAL SIGNS

History: A firm, mobile mass approximately the size of a small golf ball is palpable in the ventral cervical region, consistent with the location of the thyroid gland. The tympanic bulla on the left is prominent on palpation. Mild to moderate left mandibular lymphadenopathy noted. FIV positive.

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & NECK

There is a significant swelling of the cutaneous and subcutaneous region noted, originating dorsally at the level of the head and continuing caudally to the left side, circling the external ear canal from caudal with multiple fluid accumulations and enlargement of optional lymph nodes. Besides that, a marked hypertrophy of the supplying vessels is recognized.

The left retropharyngeal lymph node is severely enlarged, presenting a mildly amorphous shape and an inhomogeneous inner texture. Both thyroids are clearly defined. The parotid salivary gland on the left side appears involved. The mandibular salivary gland on the left side is inconspicuous.

The changes can be traced caudally to the prescapular lymph nodes, which are moderately enlarged, as well as the sternal lymph nodes within the thoracic inlet.

The neurocranium is inconspicuous. The bony structures of the skull do not show particular findings.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Highly reactive lesion of the subcutaneous region head and left neck
- Severe enlargement left retropharyngeal lymph node
- Enlargement prescapular, sternal lymph nodes, and optional lymph nodes cervical fascias

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The left retropharyngeal lymph node obviously is the most prominent change in the left side of the neck. Final assessment of a primary lesion is difficult. The subcutaneous and cutaneous changes on the left side could be the origin, because the optional lymph nodes on the way to the retropharyngeal region are enlarged as well.

Differentials include but are not limited to severe inflammatory changes as seen with fasciitis, phlegmon and initial abscess formation. The enlargement of the lymph nodes, the contrast behavior and the hypertrophic vessels would underline the assumption of a neoplastic process. Both thyroids are well defined and not included in the changes.

For further differentiation, FNA or biopsy if the affected lymph nodes could be performed next.



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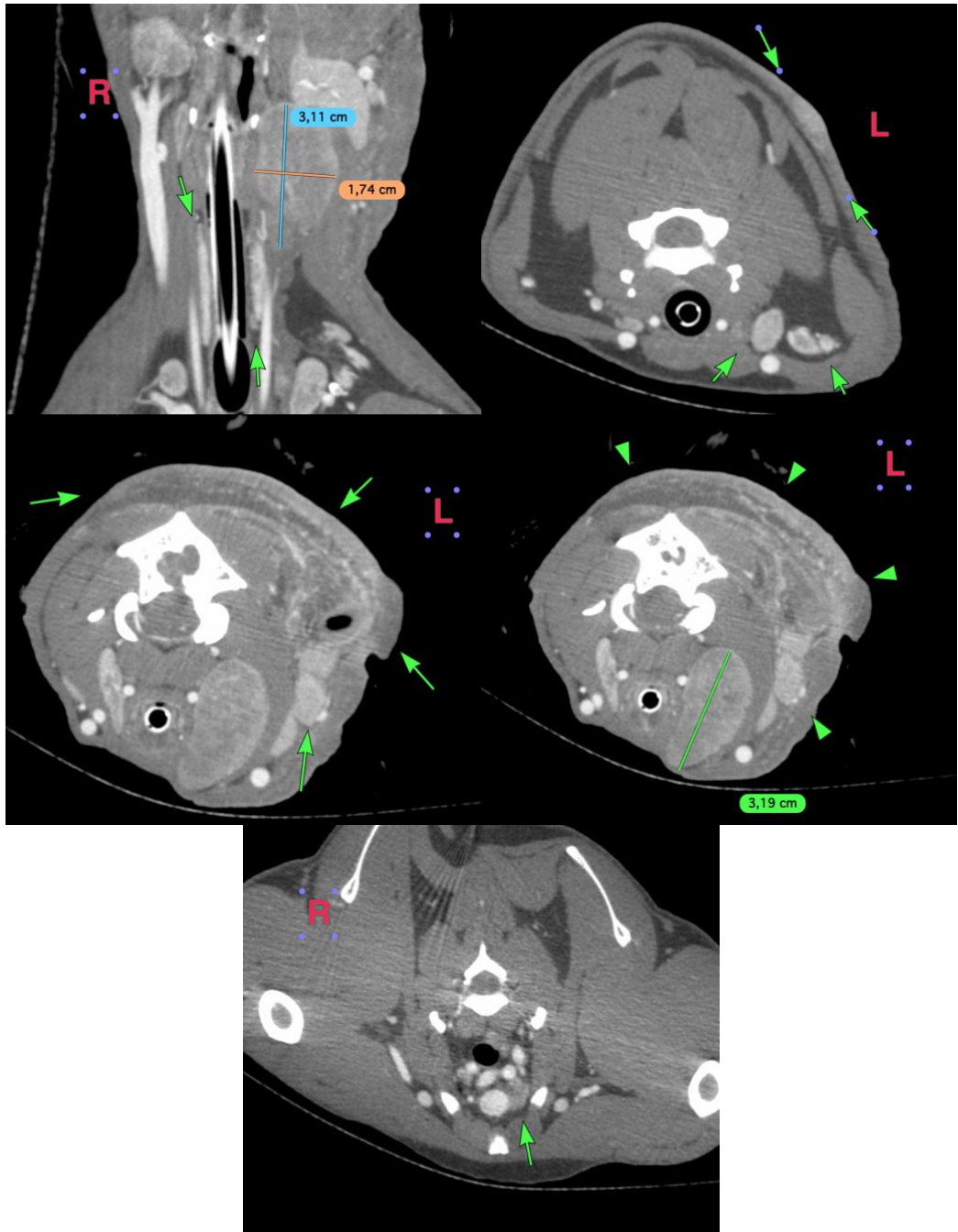
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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