

**PATIENT**

Milo Reinhardt

PRESENTING CLINICAL SIGNS

presented this afternoon for continued lethargy and reduced appetite. The pet was seen yesterday at Suncoast for acute lethargy and vomiting. Lab work was relatively unremarkable and he was treated as an OP for mild fever and nausea with SQF, Cerenia, Pepcid, and a dose of Convenia for possible occult UTI. Milo was diagnosed with DM 3 months ago and has had multiple UTIs since that time and also had a cystotomy performed earlier this year. The owner also reports bilateral stifle repairs when Milo was 1-2 years old. After discharge last night, Milo would not eat his dinner so was not given any insulin. He did eat some I/D this morning so was given 1/2 of his typical 2.5U NPH insulin. No further vomiting has been reported since discharge yesterday.

SPECIES

Canine

BREED

Yorkie

SEX

Pre/post contrast studies provided for review.

MN**COMPUTED TOMOGRAPHIC FINDINGS****AGE**

6 Years

Presented bony structures of the spine are unremarkable with an inconspicuous and harmonic course. Vertebral bodies are of regular density without signs of a lytic or sclerotic process. There is no evidence of a fracture and/or sub-/luxation. The spinal cord is homogeneous and shows no compressive lesion.

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet
Specialist in
Diagnostic Imaging

There is marked enlargement of the left medial retropharyngeal lymph node recognized showing an irregular central hypodense spot. The surrounding tissue shows poor definition with swelling that extends into the left larynx. Mandibular lymph nodes on the left are mildly enlarged. Salivary and thyroid glands are clearly defined.

HOSPITAL NAME

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The left tympanic bulla presents mild filling with soft tissue dense material, bulla wall is inconspicuous.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Moderate left retropharyngeal lymphadenomegaly
- Questionable swelling in the area of the left larynx
- Mild left mandibular lymphadenomegaly

REFERRING VET

Dr. Byron Young

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT findings show an active inflammatory process in the area of the left medial retropharyngeal lymph node. Abscess formation with central necrosis is possible. Foreign material is not detected but cannot be fully excluded. Please check tonsils/left larynx for neoplasia since this could be hidden by swelling and the tracheal tube. FNA of the enlarged lymph nodes could be performed next.

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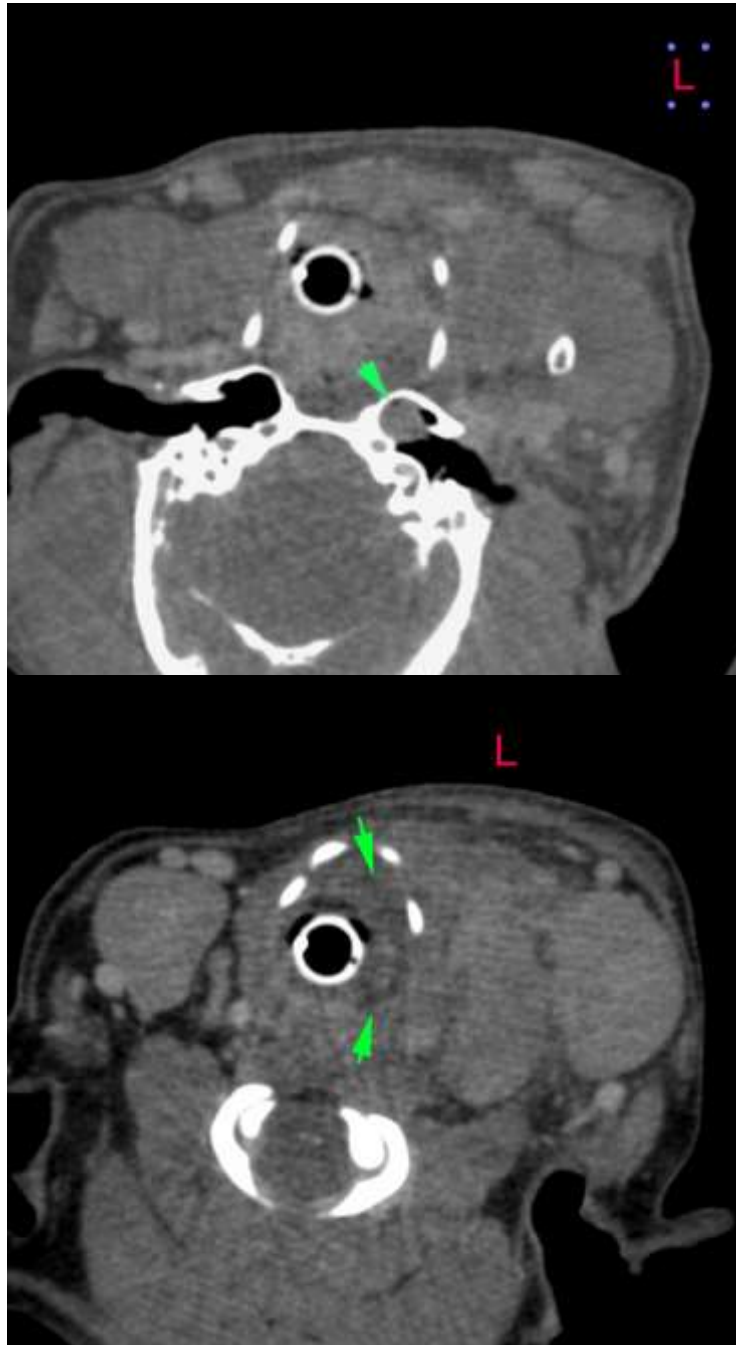
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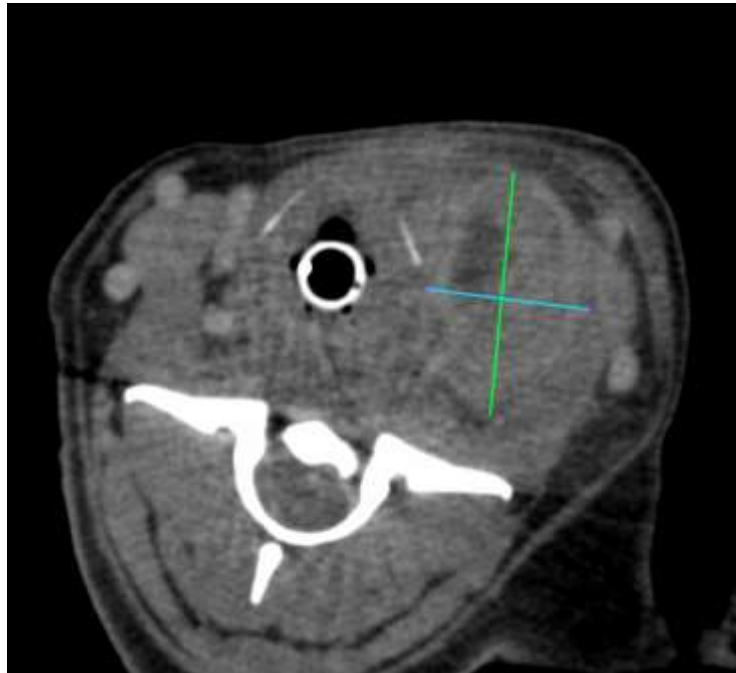
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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