

PATIENT

Rosco Cabrera

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

13 Years

WEIGHT

6.8 kg

INTERPRETED BY

Sebastian Schaub,
DVM, Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Mobile Pet Imaging

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Dr. Armstrong

INVOICE

36086

DATE

3.3.26

PRESENTING CLINICAL SIGNS

History: Rosco presented for pre-surgical consultation with Dr. Ablin regarding CT scan and potential surgical intervention for splenic mass. Patient was initially evaluated at emergency facility in Martin County in December 2025 after presenting with lethargy, pain, and limping. Emergency diagnostics revealed multiple masses: splenic mass, chest mass (benign cyst per aspiration), and pancreatic mass (showed reactive changes on cytology). Splenic mass cytology suggested benign etiology. Patient was subsequently referred to internal medicine (Dr. RT) on January 13, 2026, where a Libre continuous glucose monitor was placed for diabetic monitoring. Patient also established care with oncology, who recommended CT scan prior to surgical intervention. Owner reports patient had been left alone at their property on Nettles Island and upon return was found limping and painful, which prompted initial emergency visit. Libre monitor has now expired (placed approximately 2 weeks ago). Owner requests to proceed with CT scan followed by splenectomy if operable, with histopathology of excised tissue. Owner understands anesthesia will be required for CT and is agreeable to proceeding directly to surgery if CT findings indicate operability, rather than recovering patient between procedures.

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

A high resolution pre- and post-contrast CT study of the abdomen is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable. The caudal extremity of the spleen is curled up.

The gallbladder is bilobed.

Irregular roundish enlargement of the most lateral aspect of the left lobe of the pancreas is appreciated, presenting a uniform attenuating pattern and irregular contrast uptake. The remainder of the pancreas are evenly contoured; the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

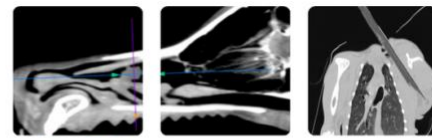
The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The vertebral endplates L7/S1 present mild spondylosis formation.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Nodular enlargement lateral aspect of the left lobe of the pancreas
- Curled caudal extremity of the spleen with normal organ architecture

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS



PATIENT

Rosco Cabrera

The nodular enlargement of the lateral aspect of the left lobe of the pancreas can present benign nodular enlargement ± retention-/pseudocyst formation or primary pancreatic soft tissue neoplasia – such as adenocarcinoma. Surgical resection of the affected part of the pancreas is feasible.

SPECIES

Feline

The spleen presents without clinically relevant abnormalities, but the odd shaped caused by the curling of the caudal extremity of the spleen.

BREED

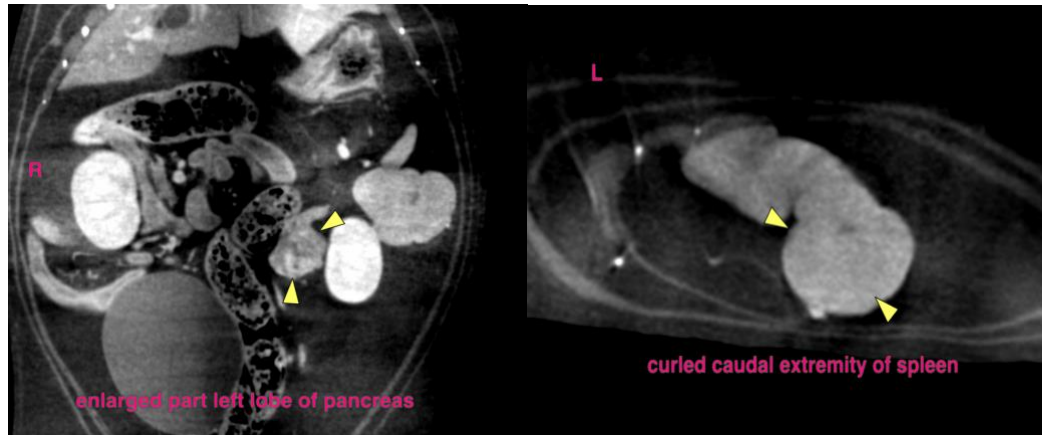
DSH

SEX

Neutered Male

AGE

13 Years



WEIGHT

6.8 kg

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.

INTERPRETED BY

Sebastian Schaub,
DVM, Dr. med. vet.
DipECVDI

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 Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com

IMAGING PERFORMED BY

Mobile Pet Imaging

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Dr. Armstrong

INVOICE

36086

DATE

3.3.26