



## PATIENT

Dollar Chen

## SPECIES

Feline

## BREED

DSH

## SEX

MN

## AGE

9M

## WEIGHT

3.5

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet.  
DipECVDI

## IMAGING PERFORMED BY

Eamon

## HOSPITAL NAME

Belconnen Veterinary  
Centre

## REFERRING VET

Eamon

## INVOICE

75017

## DATE

5-18-26

## PRESENTING CLINICAL SIGNS

coughing  
- mycoplasma infection treated previously with prolonged doxycycline dose  
Abnormal PE/Chem/CBC/UA Results: cbc/chem - lymphocyte count elevated

## COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

A pre- and post-contrast CT study of the thorax and abdomen in a bone, lung and soft tissue reconstruction is provided for review.

## COMPUTED TOMOGRAPHIC FINDINGS

### Thorax

The axillary lymph nodes are prominent.

The thymus is age related visible in the cranioventral aspect of the mediastinum. The sternal lymph nodes are prominent.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

Generalized smooth moderate thickening of the bronchial walls is appreciated.

The lung parenchyma presents the expected architecture and attenuation behavior.

Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.

### Abdomen

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 pancreas is 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.

A colonic lymph node is moderately enlarged – measuring 12 mm in diameter – and rounded; the attenuation and contrast enhancement pattern are uniform.

Ventral to the aorta in the retroperitoneal space, a diffuse soft tissue swelling without overt contrast enhancement is appreciated – extending from the level of L2/L3 up to the level of L7. The retroperitoneal fat adjacent to the soft tissue swelling presents localized soft tissue striation.

The bony and surrounding soft tissue structures reveal no abnormalities.



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## COMPUTED TOMOGRAPHIC DIAGNOSIS

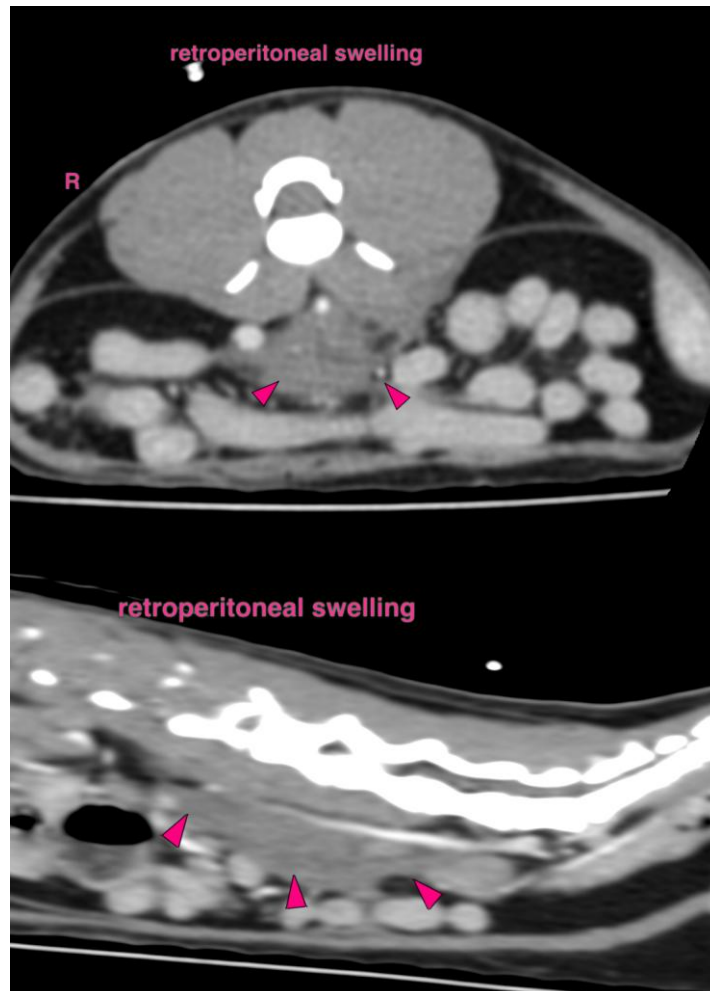
- Retroperitoneal soft tissue swelling along the ventral aspect of the aorta with surrounding cellulitis
- Lymphadenopathy colonic lymph node, axillar and sternal lymph nodes
- Bronchial lung pattern

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The retroperitoneal swelling along the aorta can present lymphatic edema, non-contrast enhancing soft tissue proliferation or hemorrhage (e.g. preceding trauma). In combination with the enlargement of multiple lymph nodes, I consider the odds for lymphatic edema or non-contrast enhancing soft tissue proliferation higher – rule out reactive lymphoid hyperplasia versus underlying round cell tumor. If not done so yet, FNA sampling of the enlarged lymph nodes ± the retroperitoneal swelling is advised; FeLV testing is beneficial as well.

A differential for the supposed prominent sternal lymph nodes is prominent thymus.

The bronchial lung pattern is fitting the history of infectious bronchitis; feline bronchial disease is a potential as well.





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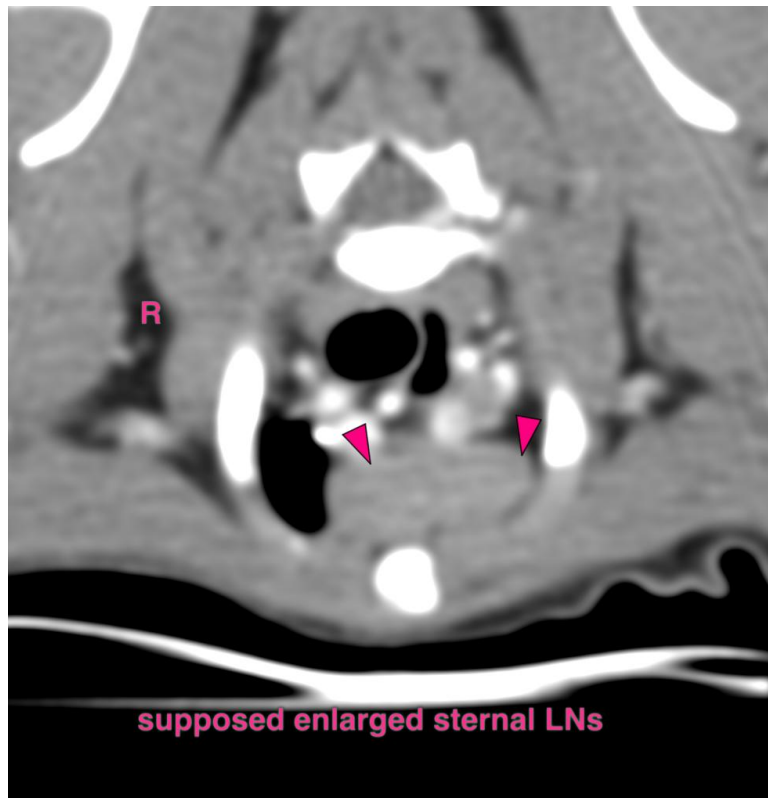
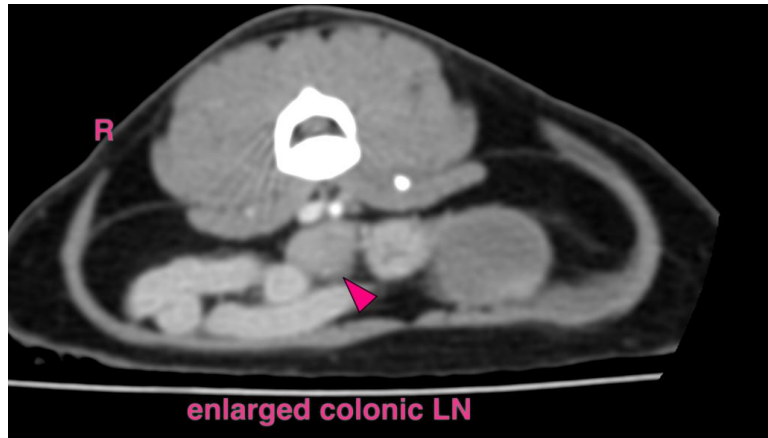
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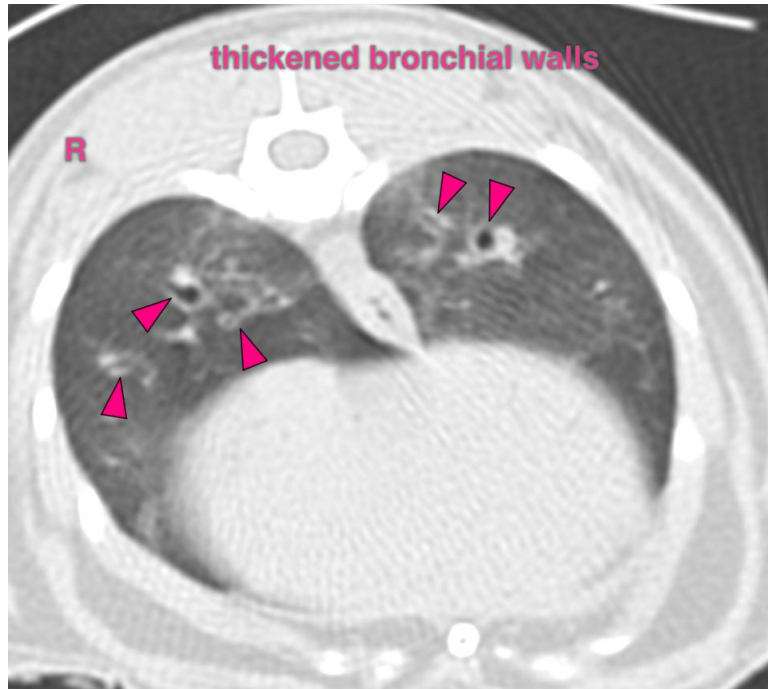
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
[info@sonopath.com](mailto:info@sonopath.com)