



PATIENT

Pickles Gallo

SPECIES

Feline

BREED

Main Coon

SEX

MN

AGE

11

WEIGHT

5.3

INTERPRETED BY

Tilde Rodrigues Froes,
DMV, MSc., Dr. Med
Vet., Dipl. CBraRVet

IMAGING PERFORMED BY

David

HOSPITAL NAME

Animal Surgical Center
- Oceanside

REFERRING VET

Short

INVOICE

72589

DATE

11-12-25

PRESENTING CLINICAL SIGNS

1.5 cm soft partially movable ventral cervical mass effect weight loss

COMPUTED TOMOGRAPHIC STUDY OF THE NECK, THORAX & ABDOMEN

A pre- and post-contrast CT study of whole-body are provided for review totaling 2 series. One pre-contrast series of the whole-body, bone algorithm. One pre-contrast series of the whole-body, soft tissue algorithm.

COMPUTED TOMOGRAPHIC FINDINGS

NECK

There is severe, generalized enlargement of the cervical lymph nodes, which are rounded and heterogeneously contrast-enhancing. The affected nodes include the medial and lateral retropharyngeal, mandibular, and multiple superficial cervical lymph nodes, bilaterally.

The mandibular and parotid salivary glands are within normal limits.

The thyroid glands, oropharynx, nasopharynx, soft palate, and hyoid apparatus are unremarkable.

The tympanic cavities and external auditory canals are normal.

In the collimated head, the Triadan 307 and 407 are absent.

THORAX

The sternal, one cranial mediastinal, and right tracheobronchial lymph nodes are slightly enlarged.

The trachea and main bronchi are within normal limits.

The pulmonary parenchyma exhibits normal attenuation without evidence of pulmonary micronodules, nodules, or masses.

The bronchial tree demonstrates normal branching and tapering, with thin, smooth walls and a normal bronchus-to-artery ratio.

The cardiac silhouette and pulmonary vessels are normal. The contrast medium adequately opacifies the cardiac chambers and great vessels.

The pleural space, ribs, diaphragm, and thoracic wall are unremarkable.

The thoracic esophagus is mildly distended with intraluminal gas, likely secondary to anesthesia.

ABDOMEN

Multiple, variably sized, enlarged lymph nodes are present throughout the abdominal cavity, including gastric, jejunal, hepatic, colic, medial iliac, and sacral lymph nodes. The jejunal lymph nodes are the most prominently enlarged, producing abdominal mass effect; the largest measures approximately 3.3 × 3.1 cm.



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The spleen is diffusely enlarged with rounded margins and homogeneous soft tissue attenuation.

The liver is mildly enlarged with regular contours, homogeneous soft tissue attenuation, and uniform contrast enhancement. The gallbladder, cystic duct, and common bile duct are within normal limits.

The gastrointestinal tract appears preserved; however, evaluation of mural detail is limited by streak artifact, particularly in the ileocolic junction region.

The descending colon and rectum contain moderate amounts of heterogeneously soft tissue attenuating fecal material admixed with gas. Wall thickness is normal.

The kidneys are normal in size, shape, and attenuation pre- and post-contrast; the renal pelvis and ureters are within normal limits.

The urinary bladder is moderately filled with hypoattenuating fluid and has a normal wall thickness.

The pancreas and adrenal glands are within normal limits.

The serosal and mesenteric fat exhibit normal attenuation.

The inguinal lymph nodes are mildly enlarged bilaterally.

Musculoskeletal structures are unremarkable.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Generalized lymphadenomegaly involving cervical, mediastinal, and multiple abdominal lymph nodes (gastric, jejunal, hepatic, colic, iliac, sacral, and inguinal). Differential diagnoses: multicentric lymphoma (most likely), less likely severe systemic inflammatory lymphadenitis.
- Diffuse splenomegaly with homogeneous enhancement, differential diagnoses include lymphoma, extramedullary hematopoiesis, or less likely reactive hyperplasia.
- Mild hepatomegaly with uniform enhancement, differential diagnoses include hepatopathy or early infiltration secondary to systemic disease.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The tomographic findings are consistent with generalized lymphadenomegaly and diffuse splenomegaly. The primary differential diagnoses include multicentric lymphoma or less likely another systemic infiltrative process.

Ultrasound-guided fine-needle aspiration (FNA) or biopsy of an enlarged lymph node is recommended for cytologic or histopathologic confirmation.



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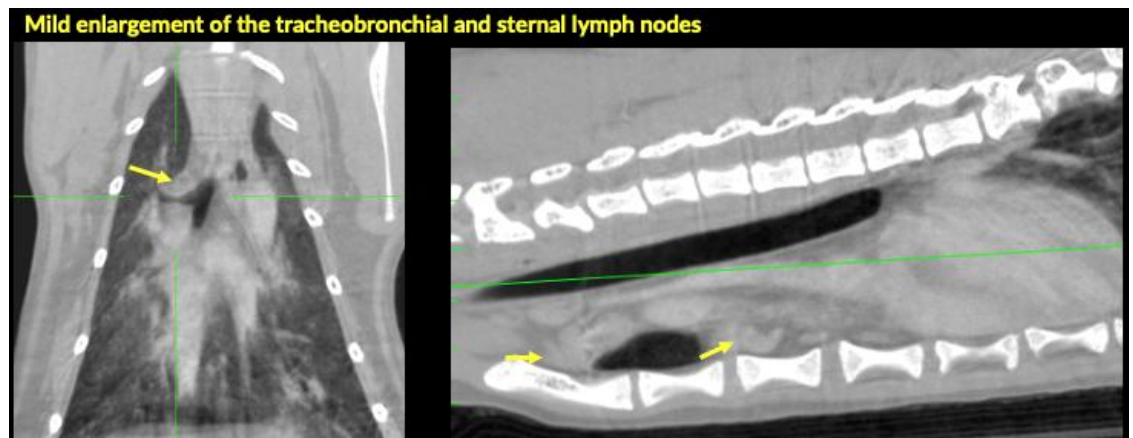
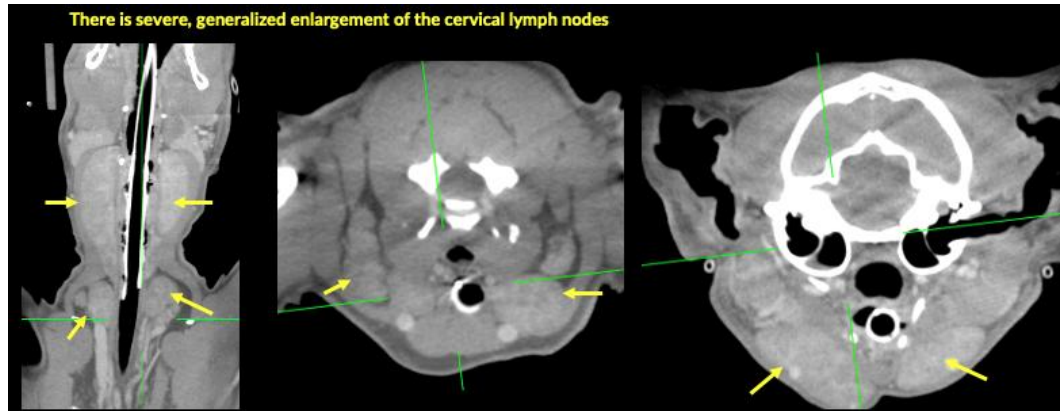
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Tilde Rodrigues Froes, DMV, MSc., Dr. Med.Vet., Dipl.CBraRVet
info@sonopath.com