



PATIENT

Akira Nieves

SPECIES

Canine

BREED

Pit Bull mix

SEX

Spayed Female

AGE

10Y

WEIGHT

58.4lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

HVSFA

HOSPITAL NAME

Hospital Veterinario
San Francisco de Asis

REFERRING VET

Meaux

INVOICE

72959

DATE

12-11-25

PRESENTING CLINICAL SIGNS

Referred by oncologist for follow-up CT of the head and thoracic met check. Hx of previous CT in May of 2025, report attached for reference.

Abnormal PE/Chem/CBC/UA Results: No recent Hx of seizures. Ataxia affecting hind limbs but ambulatory x 4. CBC: unremarkable Chemistry: mild elevation of liver enzymes (previously much higher).

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & THORAX

Pre- and post-contrast computed tomographic examination of the head and thorax, consisting of four series: One pre-contrast series of the head (bone algorithm). Two post-contrast series of the head (soft tissue algorithm). One post-contrast series of the thorax (soft tissue algorithm)

Comparison: Previous CT report dated 05/02/2025.

COMPUTED TOMOGRAPHIC FINDINGS

HEAD

No evidence of intracranial mass effect, falx cerebri deviation, or ventriculomegaly. Small, discrete dural mineralized foci are present and considered incidental. Otherwise, brain parenchyma demonstrates normal attenuation. The sella turcica region is unremarkable.

The calvarial and facial osseous structures are within normal limits, with no evidence of osteolysis or proliferative bone disease.

The nasal cavities and turbinates are within normal limits. The cribriform plate is intact.

The oropharynx, nasopharynx, and larynx are unremarkable. The frontal sinuses are within normal limits.

The tympanic cavities are air filled normal bone wall contour, and a small incidental otolith is noted within the right tympanic cavity. There are multifocal mineral foci in the external auditory canal's walls.

The globes and retrobulbar spaces are normal.

All teeth are present and unremarkable. The temporomandibular joints are bilaterally congruent.

The medial retropharyngeal and mandibular lymph nodes are within normal limits.

The mandibular, parotid, and zygomatic salivary glands are unremarkable.

THORAX

The trachea and main bronchi are within normal limits.

The sternal, cranial mediastinal, and tracheobronchial lymph nodes are unremarkable.

The pulmonary parenchyma shows normal attenuation with no evidence of micronodules, nodules, or masses.



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

The cardiac silhouette and pulmonary vessels are normal, and post-contrast opacification is adequate.

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

The thoracic esophagus is unremarkable.

The collimated cranial abdomen, including the liver and gallbladder, appears within normal limits on the available images.

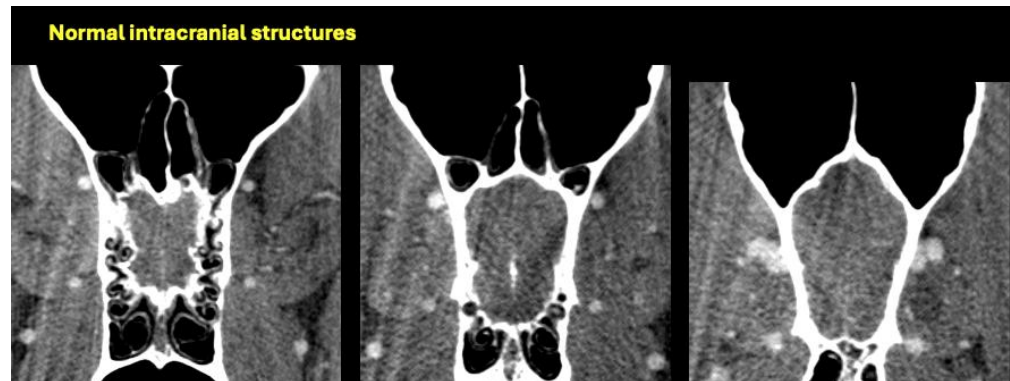
COMPUTED TOMOGRAPHIC DIAGNOSIS

- No tomographic evidence of intracranial disease or structural abnormalities of the head.
- No evidence of thoracic metastatic disease.
- Small dural mineralized foci, incidental.
- Incidental, incidental otolith in the right tympanic cavity, and multifocal mineral foci, likely dystrophic mineralizations.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The head - brain CT demonstrates no tomographic abnormalities. Compared with the prior CT examination dated 05/02/2025, the previously identified right frontal extra-axial contrast-enhancing mass is no longer visualized. If neurological signs recur or progress, MRI of the brain and/or spine is recommended for further evaluation, as CT has limited sensitivity for subtle parenchymal, meningeal, or spinal cord disease.

No thoracic metastatic disease is detected.





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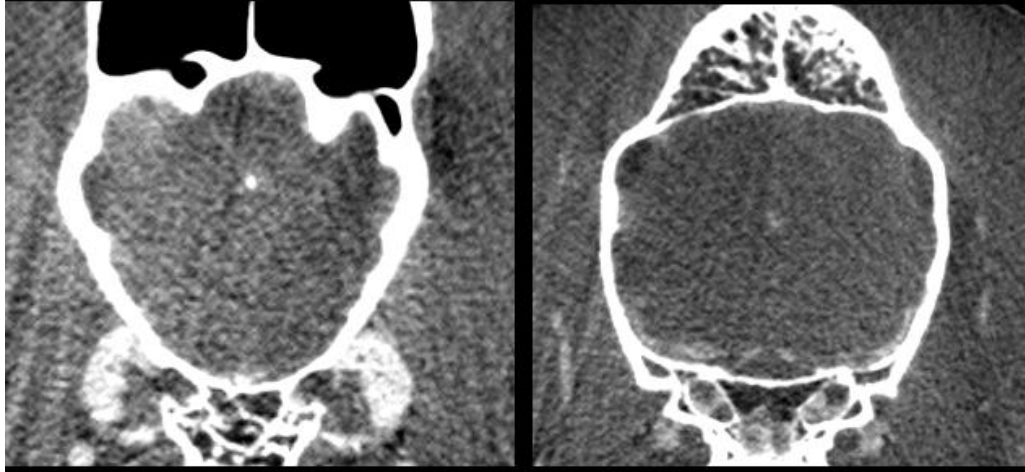
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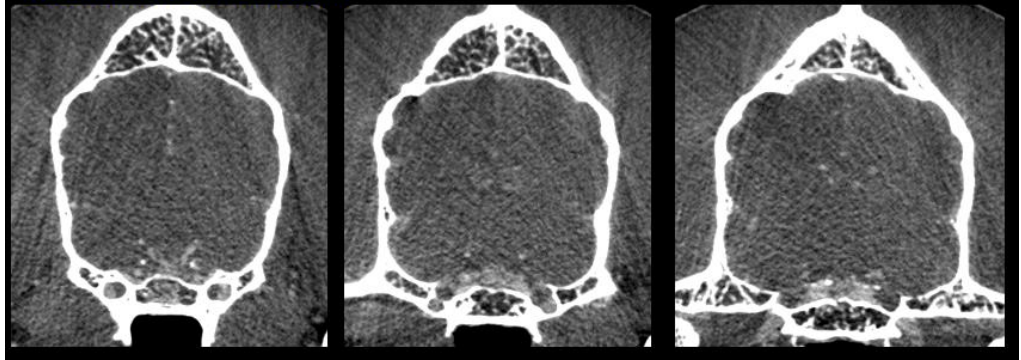
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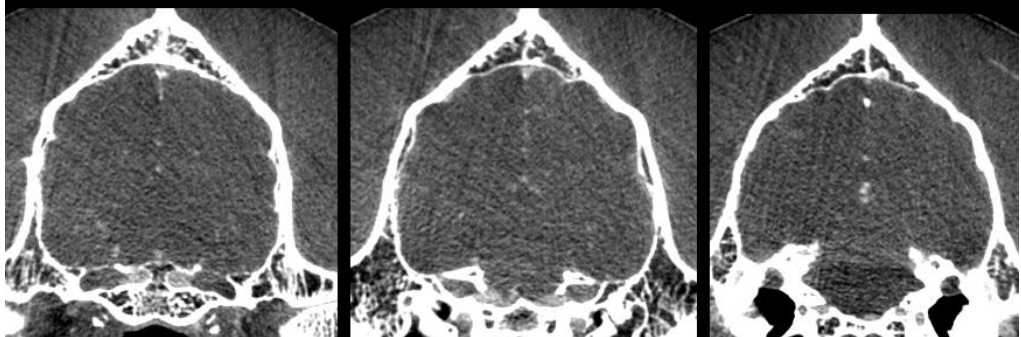
Normal intracranial structures



Normal intracranial structures



Normal intracranial structures





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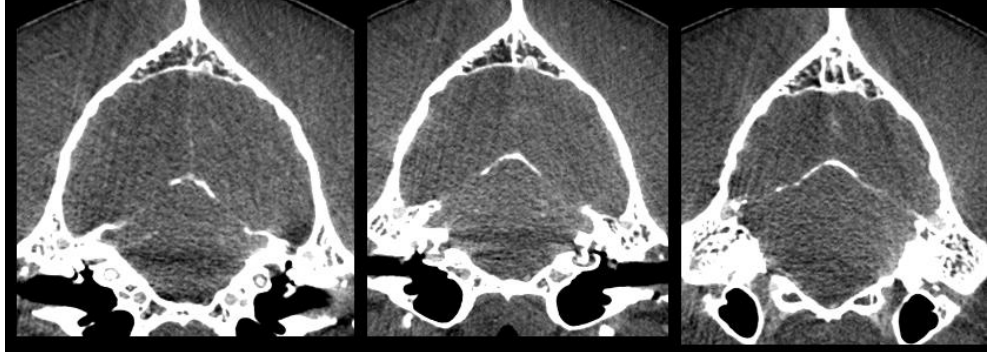
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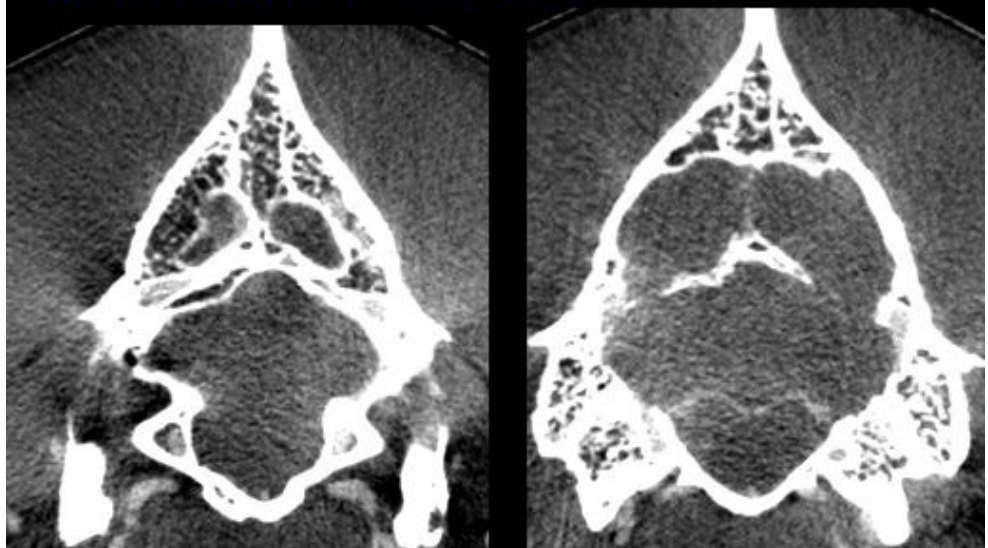
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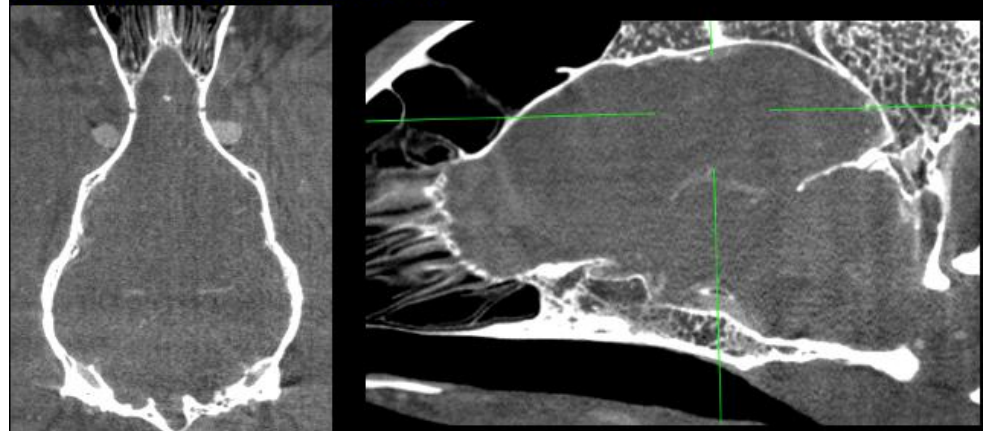
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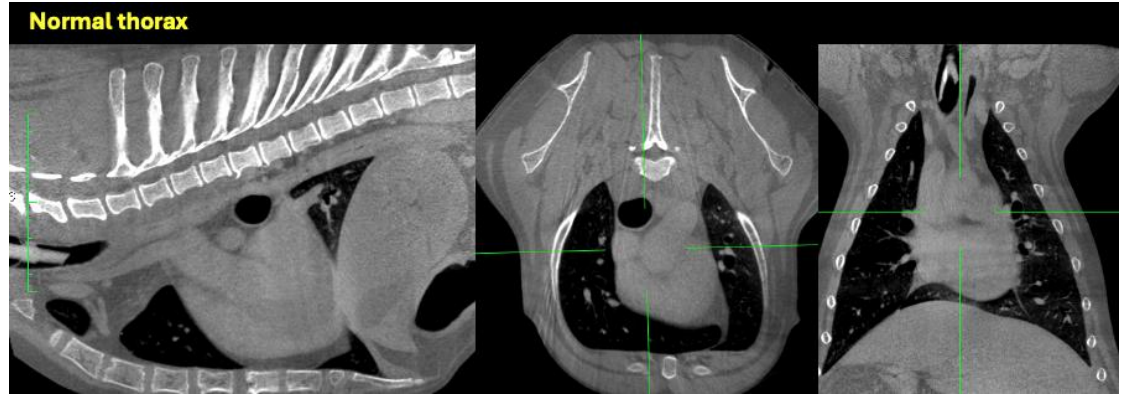
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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