



## PATIENT

Oscar Hill

## SPECIES

Canine

## BREED

Shih Tzu

## SEX

MN

## AGE

11Y, 4M

## WEIGHT

15.2kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Ana

## HOSPITAL NAME

Animal Trust - Bolton

## REFERRING VET

Ana Valega

## INVOICE

72957

## DATE

12-11-25

## PRESENTING CLINICAL SIGNS

Own vet 3 days ago treating OE then saw dermatologist- recommended CT to guide TECA Mass under R axilla - now hard on palpation, was soft before and at OV suspected to be lipoma  
Abnormal PE/Chem/CBC/UA Results: Raised cholesterol and ALP

## COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & THORAX

A pre- and post-contrast CT study of the head and thorax are provided for review totaling 4 series. Three pre-contrast series of the head and thorax, bone algorithm. One post-contrast series of the head, soft tissue algorithm.

## COMPUTED TOMOGRAPHIC FINDINGS

### HEAD

The right external ear canal wall is markedly thickened with an irregular epithelial lining, resulting in luminal narrowing and tortuosity. The right tympanic cavity is filled with hypoattenuating fluid material with normal osseous contour.

The left tympanic cavity and external auditory canal are within normal limits.

The soft palate is elongated and mildly thickened, compatible with brachycephalic conformation.

Multiple teeth are absent (Triadan 101, 102, 103, 105, 106, 107, 108, 201, 202, 203, 205, 206, 207, 208, 209, 210, 301, 302, 303, 308, 309, 311, 401, 402, 403, 404, 405, 411), with diffuse maxillary and mandibular bone resorption and remodeling.

The nasal cavities and turbinates are normal.

The cribriform plate is intact.

The frontal sinuses are rudimentary, incidental.

No evidence of intracranial mass effect, falx cerebri shift, or ventriculomegaly.

The globes and retrobulbar spaces are normal.

The temporomandibular joints are bilaterally congruent.

Right medial retropharyngeal, right lateral retropharyngeal, and right mandibular lymph nodes are mildly enlarged.

The left medial retropharyngeal and left 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 mediastinum is widened due to fat deposition; the sternal, cranial mediastinal, and tracheobronchial lymph nodes appear normal.



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There is reduced pulmonary volume, with gravity-dependent peripheral consolidations and diffuse ground-glass attenuation, most consistent with passive atelectasis. The aerated lung fields show normal attenuation.

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The bronchial tree shows normal branching and tapering.

The cardiac silhouette and pulmonary vessels are normal.

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

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MN

There is a large, homogeneous, fat-attenuating soft-tissue mass in the right axillary region, extending along the right thoracic wall, measuring at least 19.1 × 7.2 cm.

The thoracic esophagus is unremarkable.

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## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right external ear canal wall thickening with irregular epithelial lining, accompanied by a fluid-filled right tympanic cavity; compatible with chronic stenotic otitis externa/media.
- Elongated and mildly thickened soft palate, consistent with brachycephalic conformation.
- Multiple missing teeth with diffuse maxillary and mandibular bone resorption/remodeling, compatible with advanced dental disease and residual changes.
- Mild enlargement of right medial retropharyngeal, lateral retropharyngeal, and mandibular lymph nodes, likely reactive lymphadenitis.
- Large right axillary homogeneous fat-attenuating mass, most consistent with a lipomatous mass - lipoma.

## WEIGHT

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## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The tomographic examination demonstrates chronic right otitis externa/media with marked canal wall thickening, luminal narrowing, and tympanic effusion. These findings are compatible with advanced disease and support the clinician's consideration of TECA-BO depending on clinical assessment.

Mild reactive enlargement of right-sided retropharyngeal and mandibular lymph nodes is likely secondary to regional inflammation.

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The large right axillary fat-attenuating mass is most consistent with a lipoma.

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Extensive dental loss with diffuse alveolar bone remodeling is consistent with advanced dental/periodontal disease and residual changes, and odontological evaluation is recommended.

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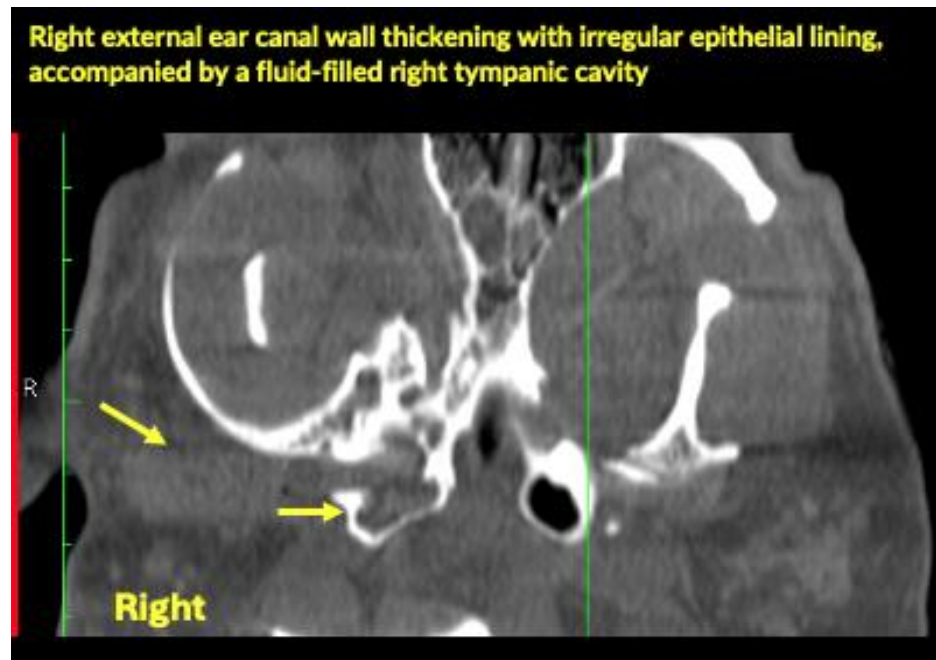
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

Canine

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.

**BREED**

Shih Tzu

**Tilde Rodrigues Froes, DMV, MSc., Dr. Med.Vet., Dipl.CBraRVet**  
[info@sonopath.com](mailto:info@sonopath.com)

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