



PATIENT

Penny Rescigno

SPECIES

Canine

BREED

Sharpei Mix

SEX

Female Spayed

AGE

6Y, 9M, 19D

WEIGHT

49.50

INTERPRETED BY

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

IMAGING PERFORMED BY

Noah Waxner, RDVM

HOSPITAL NAME

Catskill Veterinary
Services, PLLC

REFERRING VET

Noah Waxner, RDVM

INVOICE

73027

DATE

12-17-25

PRESENTING CLINICAL SIGNS

Owner reports facial swelling below the right eye that worsened significantly overnight, with blood and pus noted this morning. Owner states previous porcupine quill injury occurred about a month ago, with repeated swelling and multiple veterinary visits for quill removal in the weeks following. Owner notes that swelling has recurred intermittently in the same area since the original incident. Owner reports no recent trauma or fighting as a cause, and states swelling has been monitored daily. Owner administered Meloxicam and antibiotics at home for swelling and pain prior to this visit. Owner reports the eye was shut yesterday and that the swelling has progressed rapidly. Owner expresses concern for infection and the possibility of a retained foreign body. Head CT scan to evaluate for possible retained foreign body and extent of swelling/infection.

Abnormal PE/Chem/CBC/UA Results: PE: Appearance: Marked facial swelling and erythema periorbitally; otherwise no abnormalities of coat or posture described Eyes: OS: Marked swelling, erythema, blood and purulent discharge, eye shut. OD: Clear, no discharge. Integument: Marked facial swelling with erythema and purulent discharge beneath the right eye. CBC: Reticulocyte Hemoglobin 20.3 pg Neutrophils 12.04 K/ μ L Eosinophils 0.05 K/ μ L Chem: Potassium 3.3 mmol/L

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

A pre- and post-contrast computed tomographic study of the head was provided for review, totaling two series: one pre-contrast series (bone algorithm) and one post-contrast series (bone algorithm).

COMPUTED TOMOGRAPHIC FINDINGS

Within the facial subcutaneous tissues, located dorsal to the nasal plane and overlying the frontal bone region, there is an amorphous, irregularly marginated, rim-enhancing soft tissue lesion with a hypoattenuating central core. Additionally, within the central hypoattenuating region, a small internal structure exhibiting contrast enhancement is identified, measuring approximately 4.4 \times 6.6 mm, visible only on the post-contrast series. A small fistulous tract is noted, communicating externally with the cutaneous surface. The lesion is slightly displaced toward the left side* relative to midline.

Due to its amorphous configuration, precise measurement is challenging; however, the lesion measures at least 2.6 \times 2.4 \times 1.9 cm. The center of the lesion is in the level of the Triadan 207 consider as a reference point.

The intracranial structures show no evidence of mass effect, falx cerebri deviation, or abnormal post-contrast enhancement.

All teeth are present and within normal limits.

The temporomandibular joints are bilaterally congruent.

The nasal cavities and turbinates display normal architecture and aeration, and the cribriform plate remains intact.

The oropharynx, nasopharynx, soft palate, and tonsils are unremarkable, with no abnormalities detected in the region of the tongue.

The frontal sinuses are unremarkable.

The tympanic bullae and external auditory canals are within normal limits.



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The medial retropharyngeal and mandibular lymph nodes are mildly enlarged.

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

The thyroid glands are unremarkable.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Complex rim-enhancing subcutaneous facial lesion with a central hypoattenuating core, internal contrast-enhancing focus, and associated cutaneous fistulous tract. Findings are most consistent with a localized abscess or chronic inflammatory/infectious process, with strong suspicion of a retained tiny foreign body, differential diagnosis aggregated cellularity.
- Mild enlargement of the medial retropharyngeal and mandibular lymph nodes, compatible with reactive lymphadenitis.

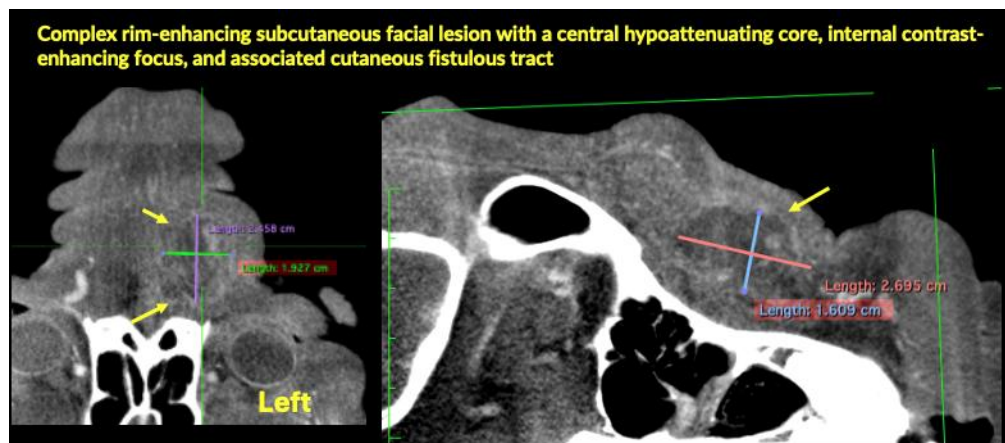
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings show a complex rim-enhancing subcutaneous facial lesion with a central hypoattenuating core (fluid attenuation), internal contrast-enhancing focus, and associated cutaneous fistulous communication and a small internal enhancing structure. In the context of a prior porcupine quill injury and recurrent swelling, these findings are suggestive of a chronic abscess with a possible tiny retained foreign body.

Surgical exploration and drainage, with careful inspection for retained foreign material, are recommended. Culture and sensitivity testing of the purulent material is advised to guide antimicrobial therapy. Histopathological evaluation may be considered if foreign material is not identified or if the lesion fails to resolve appropriately.

TECHNICAL COMMENTS

The lesion appears to be slightly displaced toward the left side*, which does not correspond to the clinical findings. Consider a possible shift or mislabeling of the lateral markers on the examination.





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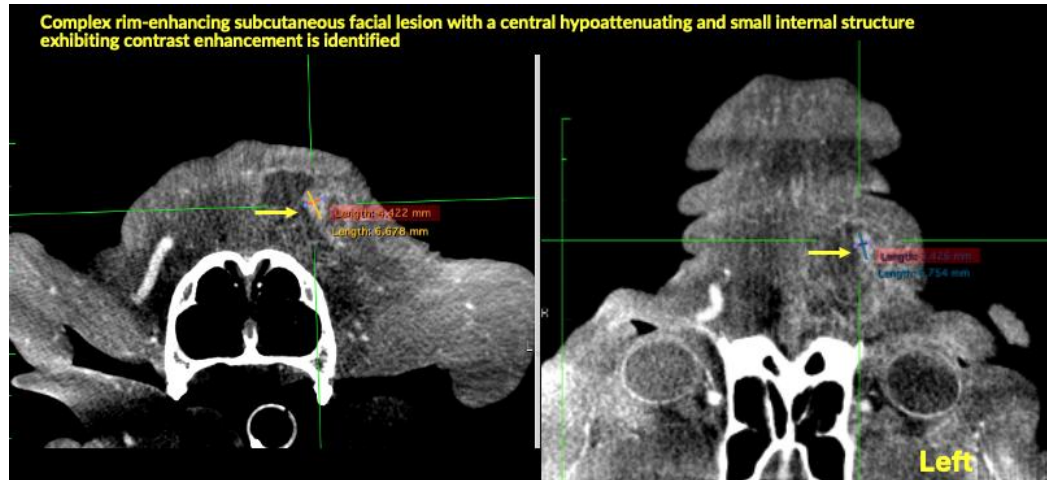
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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