



## PATIENT

Popcorn Wilson  
Astbury

## SPECIES

Canine

## BREED

Pomeranian

## SEX

Female

## AGE

11

## WEIGHT

6

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Lydia Crammond

## HOSPITAL NAME

Animal Trust - Bolton

## REFERRING VET

Lydia Crammond

## INVOICE

74257

## DATE

3-18-26

## PRESENTING CLINICAL SIGNS

- History of spinal pain on palpation in lumbo-sacral area for 6 weeks
- Sitting down and stopping walking much more at home
- No proprioceptive deficits
- 2 regions (unable to select on box) all spine to investigate spinal pain. \
- Abdomen pre and post contrast in-case of intra-abdominal pain causing referred spinal pain.

## COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN AND SPINE

A pre- and post-contrast CT study of the abdomen and spine was provided for review, comprising two series, including pre-contrast soft tissue algorithms. Post-contrast abdominal soft tissue algorithm.

## COMPUTED TOMOGRAPHIC FINDINGS

### SPINE

The vertebral column is normal in number and configuration (C1–C7, T1–T13, L1–L7, sacrum, and caudal vertebrae). Vertebral alignment is preserved. Intervertebral disc spaces are maintained.

A discrete extradural mineral focus is present within the ventral aspect of the vertebral canal at C5–C6, without evidence of spinal cord compression.

A tiny, incomplete bridging spondylosis deformans is noted at C6–C7.

The remaining thoracic, lumbar, and lumbosacral vertebral canal demonstrates normal attenuation and diameter.

No evidence of aggressive osseous lesions or acute traumatic changes is identified.

The surrounding paraspinous soft tissues are unremarkable.

### ABDOMEN

The liver is homogeneous in attenuation with normal size, contour, and uniform contrast enhancement. The gallbladder, cystic duct, and common bile duct are within normal limits.

The kidneys are normal in size, shape, contour, and attenuation on pre- and post-contrast images. The renal pelvises and ureters are unremarkable.

The urinary bladder is moderately distended with homogeneous hypoattenuating content and normal wall thickness.

The spleen is normal in size, shape, attenuation, and contrast enhancement.

The gastrointestinal tract is mildly distended but normally distributed, without evidence of mural thickening or mass effect.

The colon and rectum contain gas and heterogeneous fecal material, with normal wall thickness. The anal sacs are unremarkable.

The pancreas, abdominal lymph nodes, and adrenal glands are within normal limits.



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The mesenteric and serosal fat show normal attenuation.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

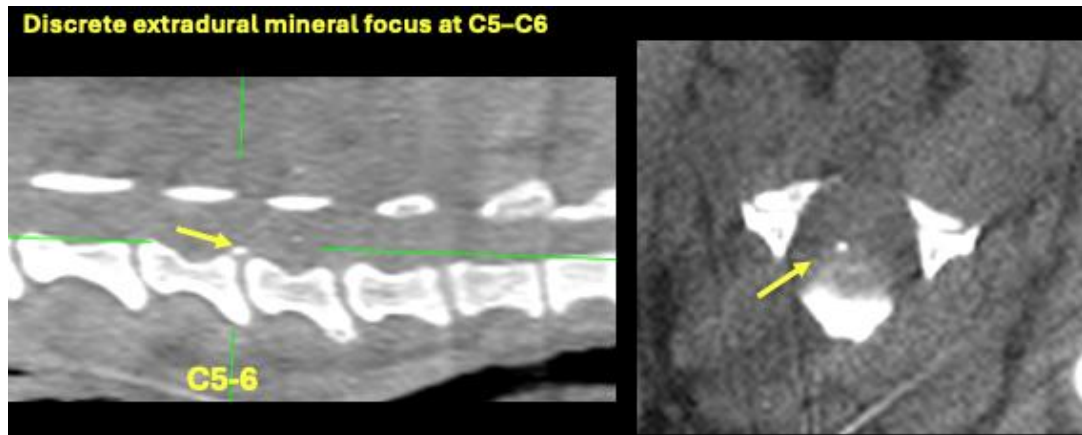
- Discrete extradural mineral focus at C5–C6, without associated spinal cord compression (incidental or early disc mineralization).
- Tiny spondylosis deformans at C6–C7, incidental
- Otherwise, unremarkable thoracic, lumbar, and lumbosacral spine.
- No significant abdominal abnormalities detected.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of clinically significant abnormalities is identified in the thoracic, lumbar, or lumbosacral spine, nor within the abdomen that could account for referred pain.

The tomographic findings reveal minimal degenerative changes in the cervical spine, including a tiny extradural mineral focus at C5–C6 and mild spondylosis deformans at C6–C7. These findings are of low magnitude and are not associated with spinal cord compression, making them unlikely to explain the reported clinical signs.

Correlation with neurological examination findings is advised. Conservative management or referral to neurology/orthopedics may be considered depending on clinical progression.





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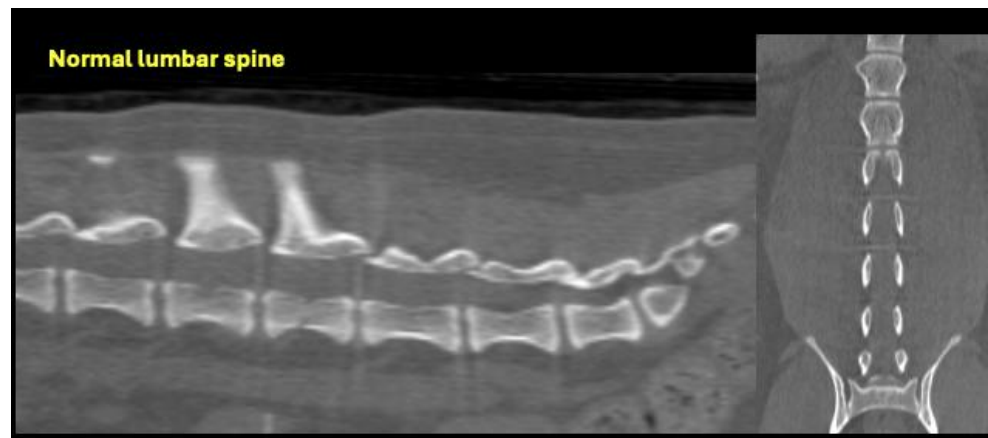
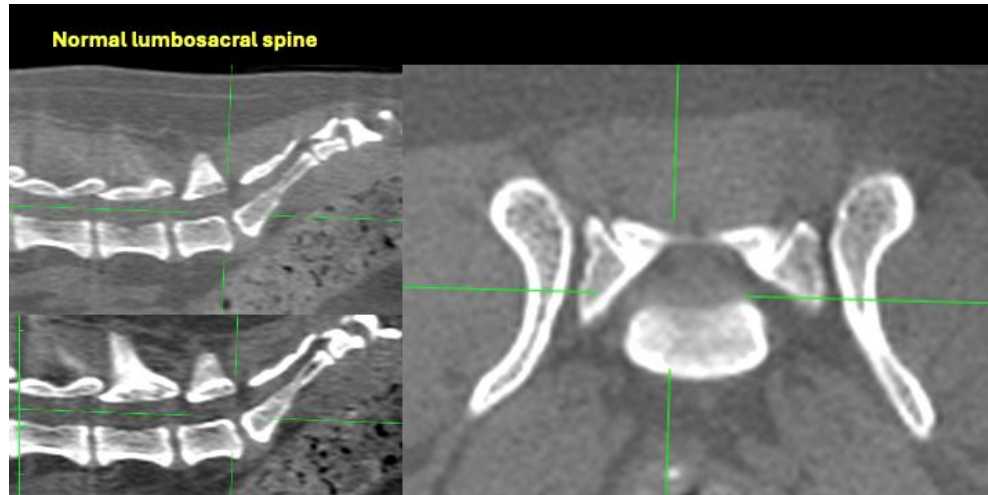
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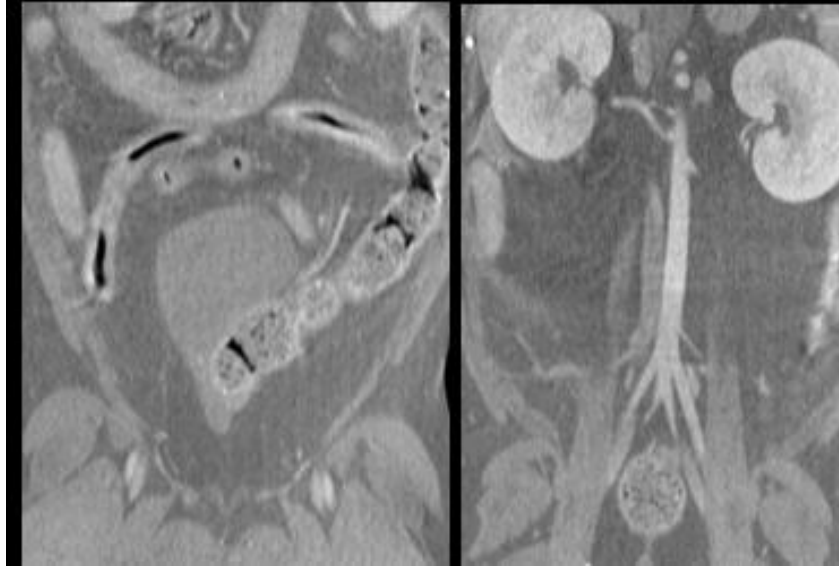
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## Normal caudal abdomen



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](mailto:info@sonopath.com)