



## PATIENT

Morty Neill

## SPECIES

Canine

## BREED

French Bulldog

## SEX

MN

## AGE

6

## WEIGHT

12

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Eamon

## HOSPITAL NAME

Belconnen Veterinary  
Centre

## REFERRING VET

Eamon

## INVOICE

74313

## DATE

3-23-26

## PRESENTING CLINICAL SIGNS

- presented for surgical management of a siacoele
- CT revealing intracranial pathology

Abnormal PE/Chem/CBC/UA Results: chem w/

## COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

A pre- and post-contrast CT study of the head is provided for review, totaling seven series. These include three pre-contrast whole-body series (soft tissue, bone, and lung algorithms), one post-contrast whole-body series (soft tissue algorithm), two pre-contrast reformatted head series (soft tissue and bone algorithms), and one post-contrast reformatted head series (soft tissue algorithm).

## COMPUTED TOMOGRAPHIC FINDINGS

Two distinct intracranial lesions are identified.

A right rostrotentorial likely intra-axial mass is present within the right frontal lobe. This lesion is poorly defined, heterogeneous, and contrast-enhancing, with an irregular central hypoattenuating component and scattered hyperattenuating/mineral foci. It measures approximately  $2.2 \times 1.7 \times 1.6$  cm. There is associated mass effect, characterized by midline shift and mild asymmetry of the lateral ventricles.

A second lesion is identified at the level of the pituitary fossa, and the pituitary gland is markedly enlarged, measuring approximately  $8.5 \times 8.2$  mm.

No evidence of aggressive calvaria bone lysis or proliferations are observed.

Mild asymmetry of the frontal process and right ethmoidal labyrinth is noted.

The frontal sinuses are rudimentary (incidental finding). The cribriform plate is intact.

The nasal cavities are unremarkable aside from mild asymmetry.

The left tympanic bulla is fluid-filled without associated osseous changes. Mild epithelial irregularity is present in the left external auditory canal. The right ear is unremarkable.

A tubular, elongated, hypoattenuating structure is identified in the right ventral mandibular-cervical region, extending along the buccopharyngeal subcutaneous tissues and adjacent to the hyoid apparatus. This structure measures approximately  $5.1 \times 1.2 \times 1.6$  cm and contains a cluster of peripheral mineral attenuating foci.

The salivary glands (mandibular, parotid and zygomatic) and regional lymph nodes are unremarkable.

Missing teeth (Triadan 305, 311, 405, 411) and mild focal resorptive lesions (Triadan 101 and 106).

Other findings include:

Mild spinal degenerative changes (in-situ disc mineralization, spondylosis deformans, hemivertebrae). Small extradural mineralized material at level of L5-L6, left-side, causing minimal spinal cord compression.



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Left elbow osteoarthritis.

Mild splenic nodular changes.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right frontal lobe intracranial (likely intra-axial) mass with heterogeneous contrast enhancement, necrotic and/or mineral components, and associated mass effect. Differential diagnoses include neoplasia and hemorrhage/edema secondary to the adjacent mass effect, second type tumor lesion; less likely considerations include intracranial abscess or granuloma.
- Marked enlargement of the pituitary gland. Differential diagnoses include pituitary neoplasia (adenoma or adenocarcinoma).
- Ventral (more right side) cervical tubular fluid structure. Differential diagnoses include residual or recurrent sialoceles (salivary mucoceles).
- Missing teeth (Triadan 305, 311, 405, 411) and mild focal resorptive lesions.
- Left tympanic bulla effusion. Differential diagnoses include fluid accumulation and/or otitis media (without osseous involvement).

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The tomographic findings demonstrate two distinct lesions with different neuroanatomical localizations (intra cranial - likely intra-axial rostral tentorial and sellar/parasellar). The lesions may be associated or not.

The right frontal lobe lesion demonstrates imaging features suggestive with intra-axial neoplasia, including poor margination, heterogeneous contrast enhancement, and central necrosis. Differential diagnoses primarily include neoplasia; however, hemorrhage and/or edema secondary to the associated enlarged pituitary gland should also be considered. Additional differentials include other primary tumor types or metastatic disease. Intracranial abscess or granuloma are considered less likely.

The pituitary enlargement is suggestive of a pituitary tumor, which is a common sellar/parasellar lesion in dogs and may occur concurrently with other intracranial neoplasms. Endocrine testing (e.g., adrenal axis evaluation) is advised to assess pituitary functionality.

Neurology consultation is also suggested.

The soft tissue cervical lesion is consistent with the clinical history of a sialocele. The hyperattenuating mineral foci have differential diagnoses that include multiple microliths, dystrophic or iatrogenic mineralization.



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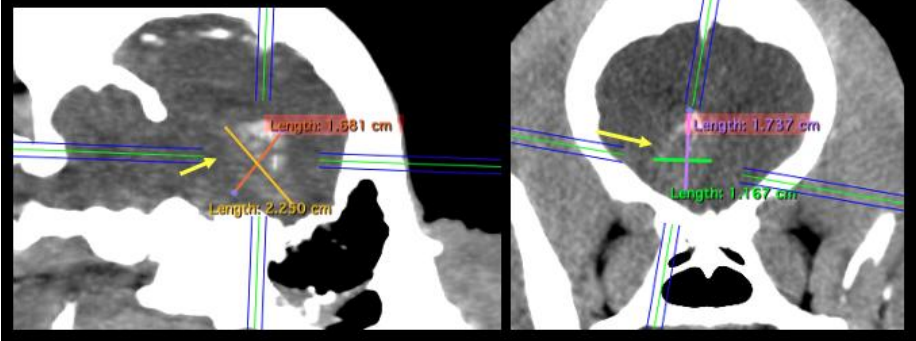
**INVOICE**

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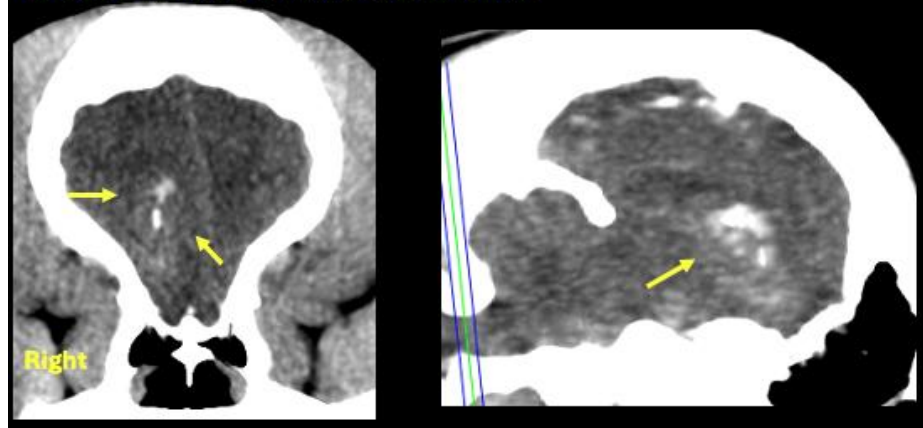
**DATE**

3-23-26

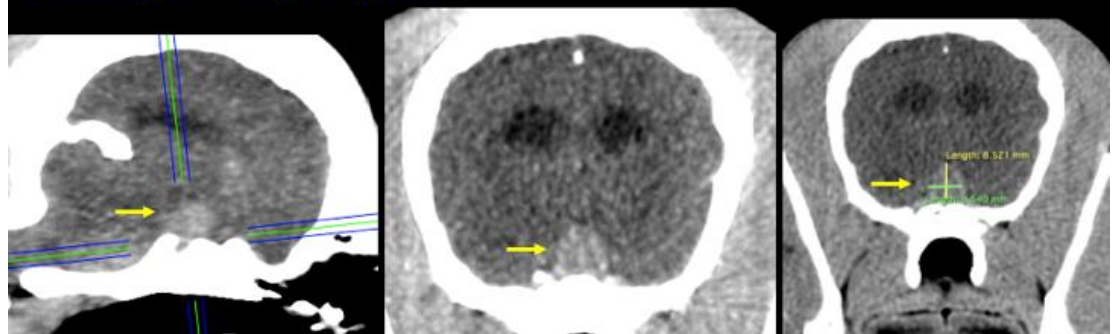
**Right Frontal Lobe Intra-Axial Mass with Heterogeneous Enhancement and Associated Mass Effect**



**Right Frontal Lobe Intra-Axial Mass with Heterogeneous Enhancement and Associated Mass Effect**



**Marked enlargement of the pituitary gland**





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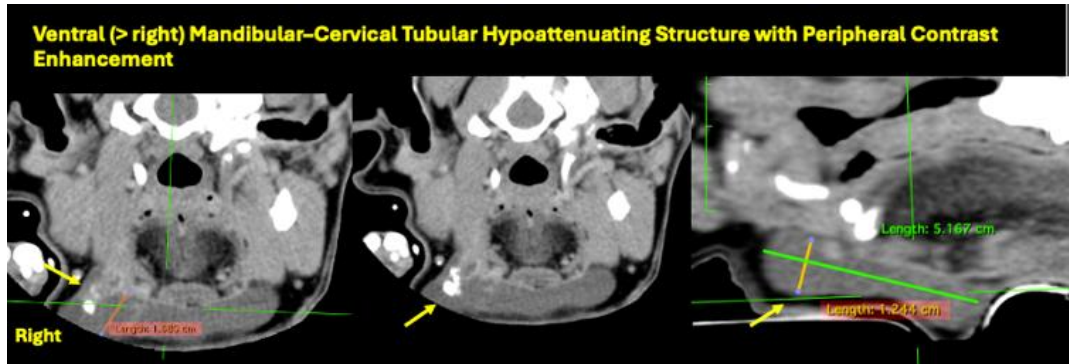
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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