



## PATIENT

Casper Roshkovsky

## SPECIES

Canine

## BREED

German Shepherd

## SEX

Intact Male

## AGE

7 Months

## WEIGHT

27.8 kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Lucy

## HOSPITAL NAME

Bridgwater Veterinary  
Hospital and Wellness  
Centre

## REFERRING VET

Dr. M. Sra

## INVOICE

14059

## DATE

03/05/26

## PRESENTING CLINICAL SIGNS

- Hard swelling on the left side of the neck, FNA revealed pus, on antibiotics, but not getting better. Want to confirm if there is any FB within the abscess before surgical explore/drain

Abnormal PE/Chem/CBC/UA Results: CHOL 8.5mmol/L, LIPA 155 U/L, WBC 21.32 x10<sup>9</sup>/L, Neutrophils 14.18 x 10<sup>9</sup>/L, Mono 4.21 10<sup>9</sup>/L

## COMPUTED TOMOGRAPHIC STUDY OF THE NECK

A pre- and post-contrast computed tomographic examination of the neck was provided for review, consisting of two series: One pre-contrast series acquired using a bone algorithm. One post-contrast series acquired using a soft tissue algorithm

## COMPUTED TOMOGRAPHIC FINDINGS

### NECK

The left medial retropharyngeal lymph node is markedly enlarged, demonstrating a large hypoattenuating cavitory center and ill-defined margins. The lesion produces marked regional mass effect with displacement of adjacent glandular and vascular structures. The lesion measures approximately 10.4 × 6.1 × 8.5 cm, not including the extensive adjacent subcutaneous and soft tissue swelling.

No radiopaque foreign material is identified within the lesion.

The lesion is contiguous with and borders the left mandibular salivary gland, although the gland itself maintains predominantly normal morphology and contrast enhancement.

The mass effect displaces the major cervical vascular structures, although no intraluminal filling defects are identified.

There is also mild rightward deviation of the hyoid apparatus and cervical trachea secondary to the mass effect.

Despite the displacement, the nasopharynx remains within normal limits. The soft palate and tonsils are unremarkable.

Additional lymphadenopathy is present:

The left mandibular lymph nodes and left lateral retropharyngeal lymph node are moderately enlarged, rounded, and mildly heterogeneous in enhancement.

The left deep cervical lymph nodes are moderately enlarged.

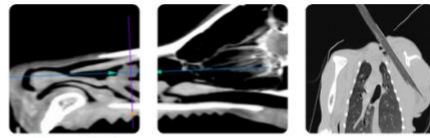
The right medial retropharyngeal (including accessory) and right mandibular lymph nodes are mildly enlarged.

The left parotid gland is slightly enlarged but demonstrates normal contrast enhancement.

The right parotid gland is within normal limits.



<b>PATIENT</b>	The thyroid glands are normal in size and attenuation; however, there is adjacent soft tissue swelling and inflammatory change surrounding the left thyroid region, resulting in mild loss of the glandular margin definition.
Casper Roshkovsky	
<b>SPECIES</b>	The globes, retrobulbar spaces, and zygomatic salivary glands are within normal limits.
Canine	The mandible, maxilla, and temporomandibular joints are unremarkable.
<b>BREED</b>	All teeth are present and appear within normal limits; however, the rostral incisive maxilla is incompletely collimated and cannot be fully evaluated.
German Shepherd	The tympanic cavities, external auditory canals, nasal cavities, turbinates, and frontal sinuses are unremarkable.
<b>SEX</b>	The cribriform plate is intact.
Intact Male	No intracranial mass effect, falx cerebri deviation, or other intracranial abnormalities are identified.
<b>AGE</b>	<b>COMPUTED TOMOGRAPHIC DIAGNOSIS</b>
7 Months	Marked cavitory enlargement of the left medial retropharyngeal lymph node with extensive regional inflammatory changes and mass effect. The primary differential diagnoses include suppurative lymphadenitis with abscess formation, bacterial lymph node abscess, less likely abscess associated with no small radiopaque foreign body, necrotic lymphadenitis secondary to penetrating injury
<b>WEIGHT</b>	Multifocal regional lymphadenopathy involving the left mandibular, left lateral retropharyngeal, left deep cervical, and mild right-sided cervical lymph nodes, most consistent with reactive or inflammatory lymphadenitis.
27.8 kg	Marked regional swelling, cellulitis and soft tissue inflammation involving the left cervical region.
<b>INTERPRETED BY</b>	<b>INTERPRETATION OF THE FINDINGS &amp; FURTHER RECOMMENDATIONS</b>
Tilde Rodrigues Froes, DMV, MSc., Dr. Med Vet., Dipl. CBraRVet	The CT findings demonstrate a large cavitory lesion centered on the left medial retropharyngeal lymph node, producing marked mass effect on adjacent cervical structures and associated with extensive regional inflammatory changes. The presence of a hypoattenuating cavitory center strongly supports abscess formation within the lymph node.
<b>IMAGING PERFORMED BY</b>	No radiopaque foreign body is identified within the lesion or adjacent tissues. However, CT cannot completely exclude the presence of small organic foreign bodies (e.g., plant material, wood fragments), which may be poorly visible on CT.
Lucy	The widespread enlargement of adjacent lymph nodes likely represents reactive inflammatory lymphadenopathy secondary to the regional inflammatory and/or infectious process.
<b>HOSPITAL NAME</b>	Given the lesion size and the lack of response to antibiotic therapy, surgical exploration and drainage appear appropriate. Intraoperative exploration should consider the possibility of an occult penetrating foreign body despite the lack of CT detection.
Bridgwater Veterinary Hospital and Wellness Centre	Culture and sensitivity testing of the purulent material is recommended if not previously performed. Histopathological evaluation of the affected lymph node should be considered if tissue is excised.
<b>REFERRING VET</b>	
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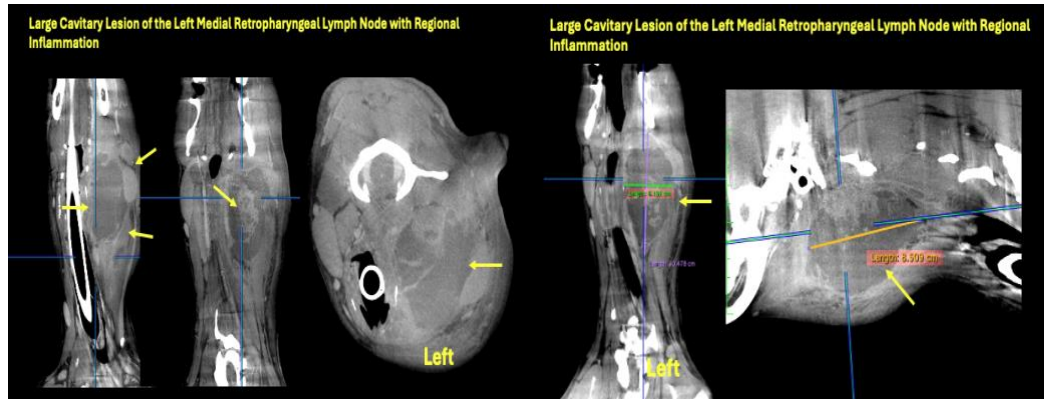
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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](mailto:info@sonopath.com)