



PATIENT

Poppy Lockett

SPECIES

Feline

BREED

DMH

SEX

Male Neutered

AGE

10Y, 8M

WEIGHT

12lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Amy Magatagan &
Emily Garza

HOSPITAL NAME

Scottsdale Veterinary
Clinic

REFERRING VET

Dr. Ferguson

INVOICE

74611

DATE

4-15-26

PRESENTING CLINICAL SIGNS

Today Poppy presented for another seizure/syncopal episode that was similar to the one P had back in December. P fell over on his side, hindlegs went stiff, P meowed a few times, was not responding, hypersalivated, then proceeded to get up was mildly ataxic/disoriented for about 30sec-1min and then was normal.

P has a hx of thymoma that was Dx in December and removed in February. Per O they did send out histopathology of mass which confirmed thymoma and the Surgeon said it was a relatively clean surgery. Sx recommended rechecking x-rays in 6mo which was May.

Abnormal PE/Chem/CBC/UA Results: Globulins 4.9 Cholesterol 361

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX AND ABDOMEN

A pre- and post-contrast CT study of the thorax and abdomen is provided for review totaling 4 series. One pre-contrast series of the thorax (bone algorithm), one pre-contrast series of the abdomen (soft tissue algorithm). One post-contrast series of the abdomen (soft tissue algorithm). One post-contrast series of the thorax (soft tissue algorithm).

COMPUTED TOMOGRAPHIC FINDINGS

THORAX

The trachea and main bronchi are within normal limits.

There is no evidence of enlargement of the sternal, cranial mediastinal, or tracheobronchial lymph nodes. The cranial mediastinum is unremarkable, with no evidence of recurrent mass.

A small subpleural soft tissue attenuation micronodule is identified in the cranial segment of the left cranial lung lobe, along the mediastinal surface, adjacent to the pulmonary trunk, measuring approximately 2.7 × 2.8 mm.

Discrete, faint, gravity-dependent, scattered ground-glass attenuation. The remaining pulmonary parenchyma demonstrates normal attenuation, with no additional nodules, masses, or diffuse pulmonary disease.

The bronchial tree shows normal branching and tapering. Bronchial walls are thin and smooth, with a normal bronchus-to-artery ratio.

The cardiac silhouette and pulmonary vasculature are within normal limits. Contrast opacification is adequate.

The pleural space and diaphragm are unremarkable.

The thoracic esophagus is unremarkable.

There is mild malalignment between the manubrium and the second and third sternbrae, associated with a mild periosteal reaction and subtle heterogeneous adjacent soft tissue changes, likely representing postoperative changes.

ABDOMEN



PATIENT

Poppy Lockett

A hypoattenuating microcystic focus (approximately 2.3 mm) is present in the right hepatic lobe. The remaining hepatic parenchyma is homogeneous, with normal size, contour, and uniform contrast enhancement.

SPECIES

Feline

The gallbladder, cystic duct, and common bile duct are within normal limits.

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

BREED

DMH

The urinary bladder is moderately distended, containing fluid and contrast material, with normal wall thickness.

SEX

Male Neutered

The spleen is normal in size, shape, and enhancement pattern.

The gastrointestinal tract is normally distended and distributed, with no evidence of mural thickening or mass effect.

AGE

10Y, 8M

The colon and rectum contain fecal material and gas, with normal wall thickness.

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

WEIGHT

12lbs

The serosal fat shows normal attenuation, with no evidence of peritoneal effusion or inflammation.

An incidental incomplete bridging spondylosis deformans is noted at T11–T12.

INTERPRETED BY

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

IMAGING PERFORMED BY

Amy Magatagan &
Emily Garza

HOSPITAL NAME

Scottsdale Veterinary
Clinic

REFERRING VET

Dr. Ferguson

INVOICE

74611

DATE

4-15-26

COMPUTED TOMOGRAPHIC DIAGNOSIS

- No evidence of recurrent cranial mediastinal mass or thoracic lymphadenopathy following previous thymoma excision.
- Solitary pulmonary micronodule (left cranial lung lobe, (~2.8 mm). Differential diagnoses include incidental granuloma (post-op scar), early metastatic lesion (less likely but cannot be excluded given history of neoplasia).
- Mild sternal malalignment with periosteal reaction and adjacent soft tissue changes, most consistent with postoperative changes.
- Incidental hepatic microcyst.
- Incidental T11–T12 spondylosis deformans.
- Otherwise, unremarkable thoracic and abdominal CT examination.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is no tomographic evidence of thymoma recurrence or thoracic metastatic disease. The cranial mediastinum appears normal, which is consistent with a favorable postoperative status.

The identified pulmonary micronodule is very small and nonspecific. While it may represent an incidental benign finding (e.g., granuloma, postoperative scar), early metastatic disease cannot be entirely excluded in the context of previous neoplasia. Follow-up thoracic imaging (CT or radiographs) in approximately 2–3 months is recommended to assess for stability.

The sternal changes are most consistent with prior surgical intervention and are not suggestive of active pathology.



PATIENT

Poppy Lockett

SPECIES

Feline

BREED

DMH

SEX

Male Neutered

AGE

10Y, 8M

WEIGHT

12lbs

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Amy Magatagan &
Emily Garza

HOSPITAL NAME

Scottsdale Veterinary
Clinic

REFERRING VET

Dr. Ferguson

INVOICE

74611

DATE

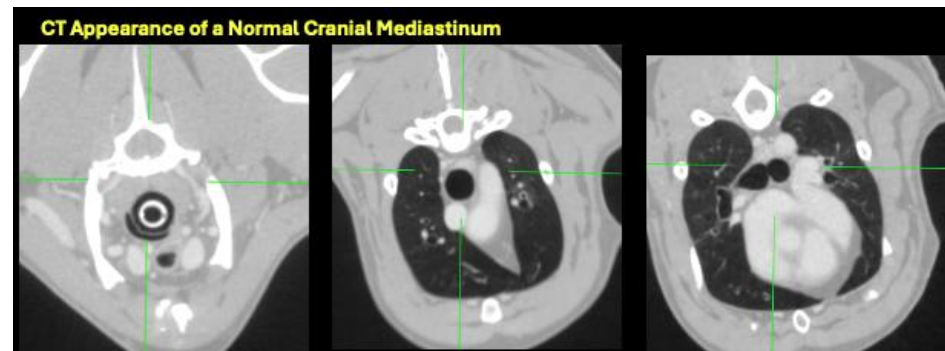
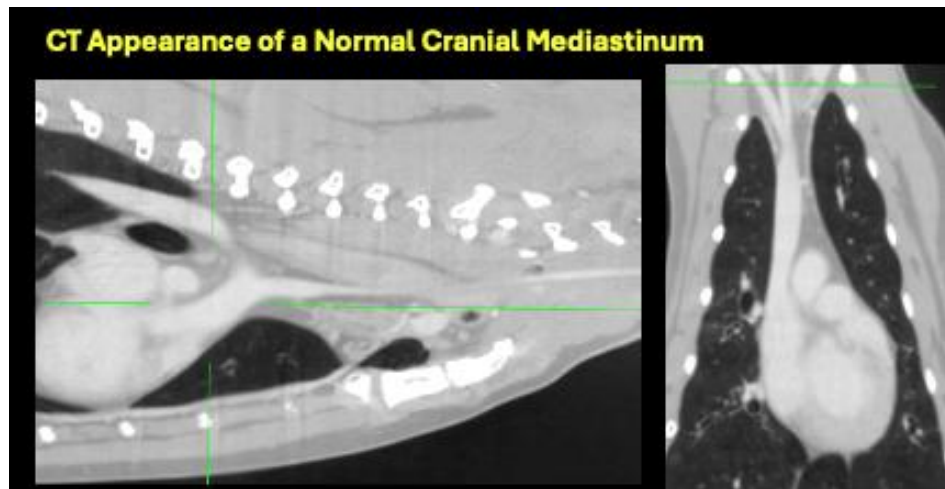
4-15-26

The abdominal findings are largely unremarkable and incidental, with no evidence of metastatic disease.

Given the clinical history of episodic neurologic events, the current CT findings do not provide an explanation for the reported seizure or syncopal episodes. Advanced neuroimaging (CT or MRI of the brain) is suggested for further investigation.

TECHNICAL COMMENTS

The lateral markers appear inverted.





PATIENT

Poppy Lockett

SPECIES

Feline

BREED

DMH

SEX

Male Neutered

AGE

10Y, 8M

WEIGHT

12lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Amy Magatagan &
Emily Garza

HOSPITAL NAME

Scottsdale Veterinary
Clinic

REFERRING VET

Dr. Ferguson

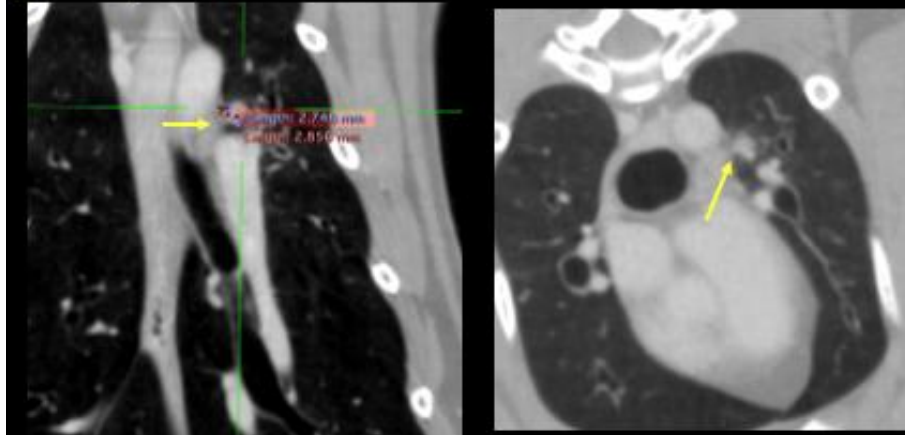
INVOICE

74611

DATE

4-15-26

Solitary Pulmonary Micronodule in the Left Cranial Lung Lobe (~2.8 mm)



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