



PATIENT

Prince Yencha

SPECIES

Feline

BREED

Siamese Mix

SEX

MN

AGE

9

WEIGHT

5

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Runde

HOSPITAL NAME

Northeast Veterinary
Referral Hospital

REFERRING VET

Dr. Runde

INVOICE

74445

DATE

4-2-26

PRESENTING CLINICAL SIGNS

- presented for a suspected fractured/dislocated jaw. severe dental disease noted.

Abnormal PE/Chem/CBC/UA Results: elevated alt

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & THORAX

A pre- and post-contrast CT study of the head and thorax are provided for review totaling 4 series. One pre-contrast series of the head bone algorithm. Two post-contrast series of the head soft tissue algorithm. One post-contrast series of the thorax bone algorithm.

COMPUTED TOMOGRAPHIC FINDINGS

HEAD

There is marked, diffuse reduction in bone attenuation affecting the maxilla and mandible bilaterally, associated with multifocal dental resorptive lesions involving multiple remaining teeth.

A severe expansile lesion is present in the rostral buccal mandibular region adjacent to Triadan 304, with surrounding osteolysis. Additional severe resorptive lesions are noted adjacent to Triadan 204, 108, and 208.

There is suspicion of a pathological fracture of the left maxilla at the level of the pterygopalatine fossa (region of Triadan 208).

Multiple missing teeth are noted (Triadan 104, 106, 206, 207 [with retained root fragment], 209, 307, 407). Marked dental root resorption is observed, particularly affecting Triadan 204, 108, 208, and 409, in association with severe alveolar bone loss.

At least two sites of oronasal fistulation are identified, most evident adjacent to the absent Triadan 104 and the region of Triadan 208.

Within the nasal cavities, there is moderate multifocal turbinate loss of definition with mild fluid accumulation, more pronounced adjacent to the areas of oronasal communication.

The medial retropharyngeal and mandibular lymph nodes are moderately enlarged and heterogeneously contrast-enhancing, more pronounced on the left.

The cribriform plate is intact.

The oropharynx and nasopharynx are within normal limits.

The frontal sinuses are unremarkable.

No intracranial mass effect or midline shift is observed.

The tympanic bullae and external ear canals are unremarkable.

The globes and retrobulbar spaces are normal.

The temporomandibular joints are bilaterally congruent.



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The salivary glands are within normal limits.

THORAX

The trachea and main bronchi are within normal limits.

There is marked reduction in volume and consolidation affecting the cranial segment of the left cranial lung lobe and the right middle lung lobe, with associated mediastinal shift toward the left hemithorax.

The remaining pulmonary lobes show adequate expansion, with scattered peripheral tree-in-bud opacities, mild subpleural ground-glass attenuation, and a discrete diffuse increase in pulmonary attenuation.

The sternal, cranial mediastinal, and tracheobronchial lymph nodes are within normal limits.

The cardiac silhouette and pulmonary vasculature are unremarkable, with appropriate post-contrast opacification.

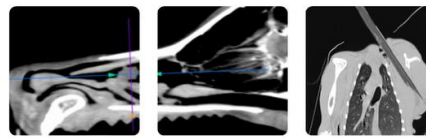
The pleural space, diaphragm, ribs, and thoracic wall are unremarkable.
The thoracic esophagus is within normal limits.

Cranial Abdomen (limited field)

A small, well-defined hypoattenuating cystic lesion is identified in the right hepatic lobe, measuring approximately 0.6 cm.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Severe, diffuse dental and periodontal disease characterized by extensive tooth resorption, marked alveolar bone loss, and multiple missing teeth. Differential diagnosis includes concurrent feline tooth resorption (TR), and osteomyelitis.
- Expansile osteolytic lesion associated with Triadan 304, causing focal regional enlargement. Differential diagnoses include feline tooth resorption with associated alveolar bone expansion, chronic inflammatory osteolysis, and osteomyelitis.
- Multiple additional severe resorptive lesions are present (Triadan 204, 108, and 208), with suspected pathological fracture of the left maxilla at the level of the pterygopalatine region.
- Multiple oronasal fistulae are present, most prominent at the regions of Triadan 104 and 208, with likely secondary rhinitis.
- Moderate bilateral enlargement of the medial retropharyngeal and mandibular lymph nodes, likely reactive.
- Pulmonary findings are characterized by lobar consolidation involving the left cranial and right middle lung lobes and reduction of volume, with associated mediastinal shift, in addition to mild multifocal tree-in-bud and minimal ground-glass pulmonary opacities. Differential diagnoses for the areas of consolidation include primarily passive pulmonary atelectasis and, secondarily, bronchopneumonia (including aspiration or infectious etiologies). Additional considerations include mild lower airway inflammatory disease and, less likely, chronic interstitial pulmonary change/fibrosis.



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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

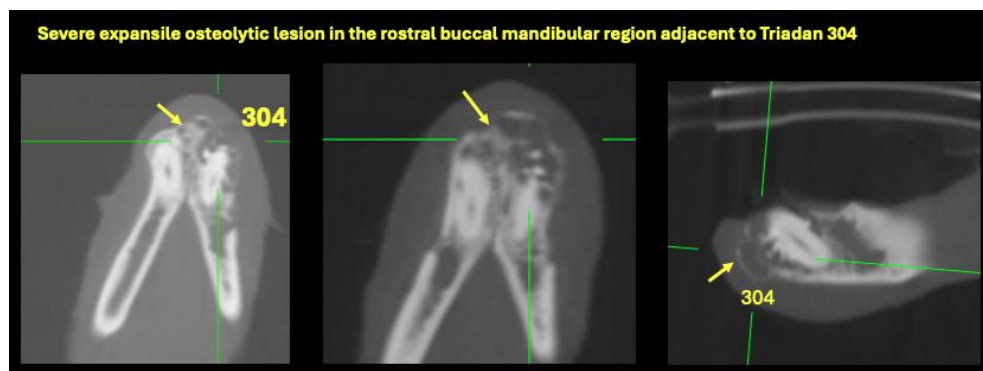
The findings are consistent with severe, diffuse dental and periodontal disease, characterized by advanced feline tooth resorption (TR), marked alveolar bone loss, and multiple missing teeth. Multiple oronasal fistulae (Triadan 104 and 208) with secondary rhinitis.

A focal expansile osteolytic lesion at Triadan 304 is present, most consistent with severe odontogenic disease, with differential diagnoses including advanced TR with alveolar remodeling and secondary osteomyelitis.

Thoracic findings suggest passive atelectasis, possible mild bronchopneumonia (including possible aspiration), with concurrent mild lower airway inflammatory disease.

Dental/oral management is recommended. However, the mandible and maxilla exhibit extensive bone loss, which may increase the risk of iatrogenic fracture during treatment. Consider culture and/or histopathology if osteomyelitis is suspected.

Correlate the thoracic findings clinically; consider airway sampling and/or empirical therapy if indicated.





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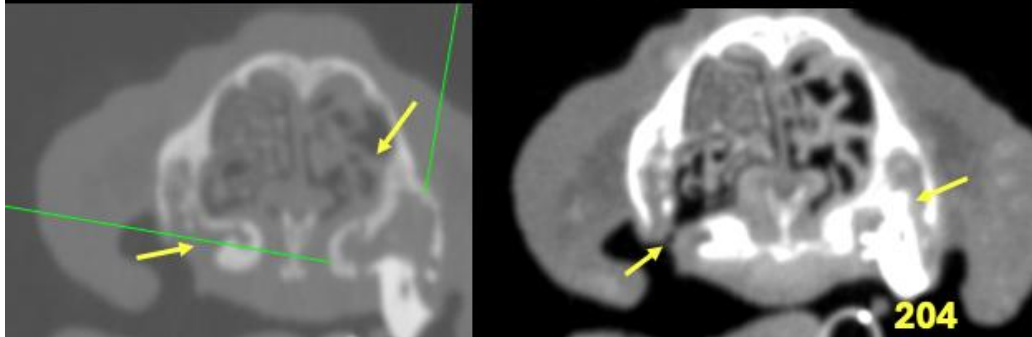
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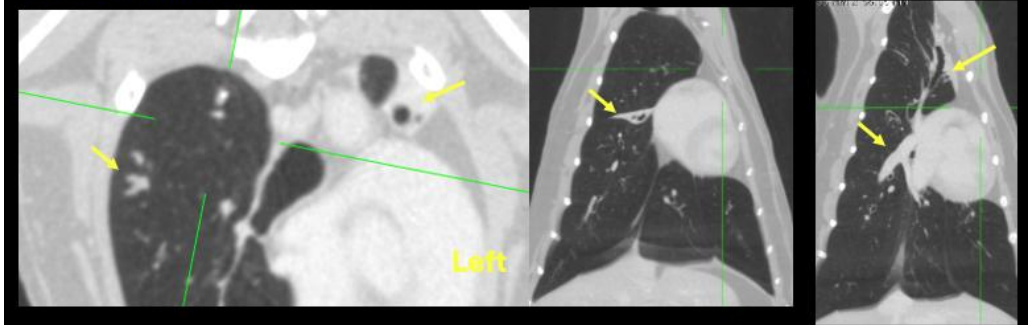
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Severe dental alveolar bone loss, oronasal fistula, and adjacent rhinitis



Pulmonary consolidation involving the left cranial and right middle lung lobes, with multifocal tree-in-bud opacities



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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