



PATIENT

Lexi Baumhammer

SPECIES

Canine

BREED

Doberman

SEX

FM

AGE

6

WEIGHT

45

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

75160

DATE

5-27-26

PRESENTING CLINICAL SIGNS

recent melanocytoma removed from right hind limb

Abnormal PE/Chem/CBC/UA Results: cbc/chem w/ histopathology Dermal melanocytoma

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD, THORAX AND ABDOMEN

A pre- and post-contrast CT study of the head, thorax and abdomen is provided for review totaling 6 series. One pre-contrast series of the whole-body (soft tissue algorithm). One pre-contrast series of the thorax (lung algorithm). One pre-contrast series of the whole-body (bone algorithm). One post-contrast series of the whole-body (soft tissue algorithm). One post-contrast series of the head (bone algorithm). One post-contrast series of the head (soft tissue algorithm).

COMPUTED TOMOGRAPHIC FINDINGS

HEAD

The nasal cavities are bilaterally patent with preserved turbinate architecture. The frontal sinuses are normally aerated. The cribriform plate is intact.

The hyoid apparatus, soft palate, thyroid cartilage, and cricoid cartilage are unremarkable.

All visible teeth are within normal limits, caudal to the Triadan 104/204.

The nasopharynx, soft palate, and oropharynx are unremarkable.

The tympanic bullae are bilaterally air-filled and normal in appearance. The external ear canals are unremarkable.

The globes, retrobulbar spaces, extraocular musculature, and orbital structures are within normal limits.

The mandibular, parotid, zygomatic salivary glands are symmetric and unremarkable.

No intracranial mass effect, midline shift, ventriculomegaly, or abnormal intracranial contrast enhancement is identified.

The calvarium and visualized osseous structures of the skull are unremarkable.

The medial retropharyngeal lymph nodes and mandibular lymph nodes are within normal limits.

THORAX

The trachea and main bronchi are within normal limits.

The sternal, cranial mediastinal, and tracheobronchial lymph nodes are unremarkable.

The pulmonary parenchyma shows normal attenuation with no evidence of micronodules, nodules, or masses.

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



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The cardiac silhouette and pulmonary vessels are normal, and post-contrast opacification is adequate.

The pleural space, diaphragm, and thoracic wall are unremarkable.

The thoracic esophagus is unremarkable.

ABDOMEN

The liver is normal in size and shape, with homogeneous attenuation and uniform contrast enhancement. The gallbladder and biliary tract are unremarkable.

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

The pancreas and adrenal glands are within normal limits.

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

The urinary bladder is moderately distended with fluid and admixed contrast material. Wall thickness is within normal limits.

The gastrointestinal tract is normally positioned with mild physiologic gas/fluid distension and no abnormal mural thickening.

The colon and visible rectum contain mild fecal material and gas. Wall thickness is within normal limits.

The abdominal lymph nodes are within normal limits.

The serosal fat demonstrates normal attenuation.

No significant musculoskeletal abnormality is identified within the included field of view.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Unremarkable CT examination of the head, thorax, and abdomen.
- No CT evidence of metastatic disease identified within the examined regions.
- No evidence of regional or distant lymphadenopathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No clinically significant tomographic abnormalities are identified within the head, thorax, or abdomen.

Specifically, there is no CT evidence of pulmonary metastatic disease, metastatic lymphadenopathy, or detectable abdominal metastatic lesions associated with the reported history of dermal melanocytoma.



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Fig. 1. Thoracic evaluation
Normal thorax

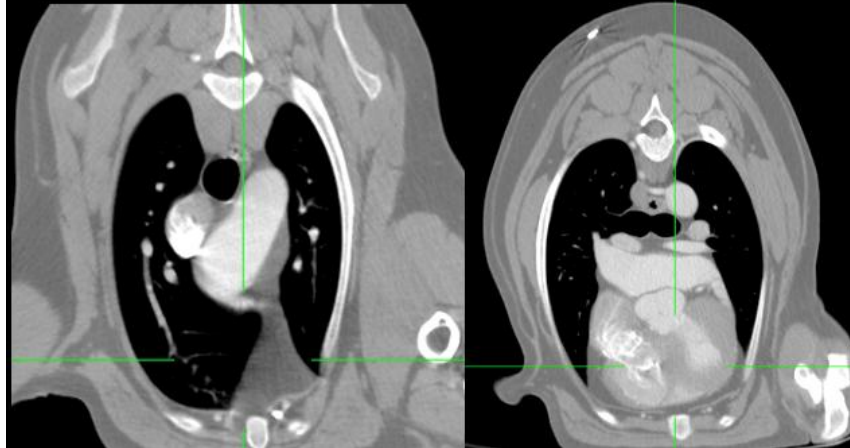


Fig. 2. Pulmonary evaluation
Pulmonary parenchyma was normal with no pulmonary nodules, or masses

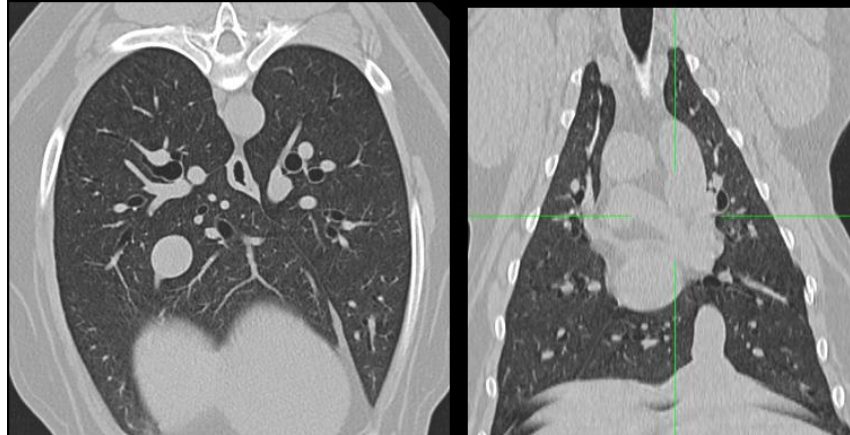
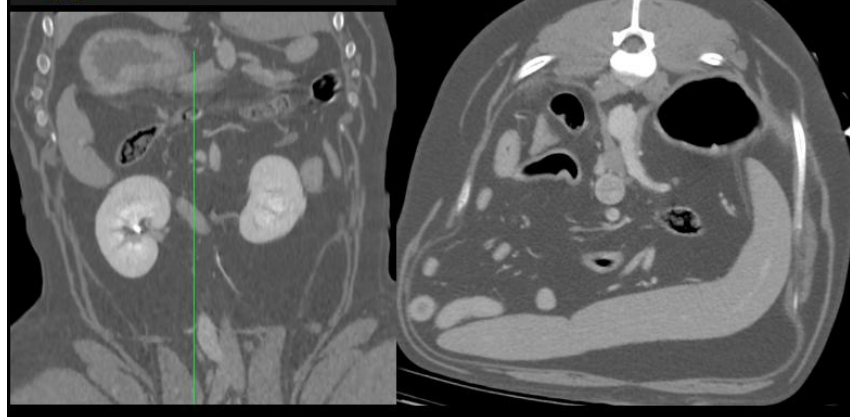
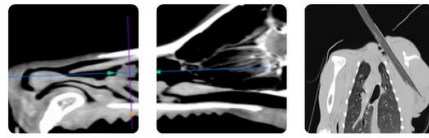


Fig. 3. Abdominal organs
Abdominal viscera, including the spleen, kidneys, were unremarkable on post-contrast imaging.





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Fig. 4. Thoracoabdominal evaluation
Normal thorax and liver



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