



PATIENT

Tidwell, Teddy Tidwell

SPECIES

Feline

BREED

Siamese

SEX

MN

AGE

13Y

WEIGHT

21.8lbs

INTERPRETED BY

Dr. Tais Guimarães,
MV

IMAGING PERFORMED BY

Brittany Bethel, CVT

HOSPITAL NAME

Williamsport West
Veterinary Hospital

REFERRING VET

Stephanie Daverio,
VMD

INVOICE

74990

DATE

5-13-26

PRESENTING CLINICAL SIGNS

Pt was last seen at a veterinary ER in December 2025 after having multiple episodes of vomiting/regurgitating food and collapse shortly afterward, followed by quick recovery and resumption of eating with no further vomiting/regurgitation. At the time of the visit, he had bloodwork that showed a slightly low potassium, slightly raised ALT, and abnormal BNP. He had radiographs of his thorax and a soft tissue density area was found in the mediastinum, with a presumptive diagnosis of a mass in this location. Some other changes noted on the radiologist's report within the thorax suggested issues with bronchi -- no breathing issues have been noted, and no more collapsing episodes have been witnessed.

COMPUTD TOMOGRAPHIC STUDY OF THE THORAX AND ABDOMEN

Survey and post I.V. contrast series are available.

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5 , the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

Mediastinum is distended by fat deposition.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior, except for increased opacification with reduced parenchymal volume of cranial lobes (atelectasis).

Thyroid lobes are symmetric, no nodules seen.

Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.

Abdomen

Both kidneys are normally positioned and normal in volume. Right kidney has mild irregular contours on caudal pole. No stones seen.

Mild distension of left and right ureters (left is larger than the right) on proximal aspect, with abrupt ending, no stones or masses seen. Normal insertion of both ureters.

Spleen is normal in size with homogeneous enhancement.

Mild hepatomegaly is noted.

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

The pancreas is evenly contoured; the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.



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The delineation, wall, and content of the gastrointestinal tract are considered within normal limits throughout.

The urinary bladder is normally distended, no stones seen.

Cervical, Thoracic and Lumbar Spine

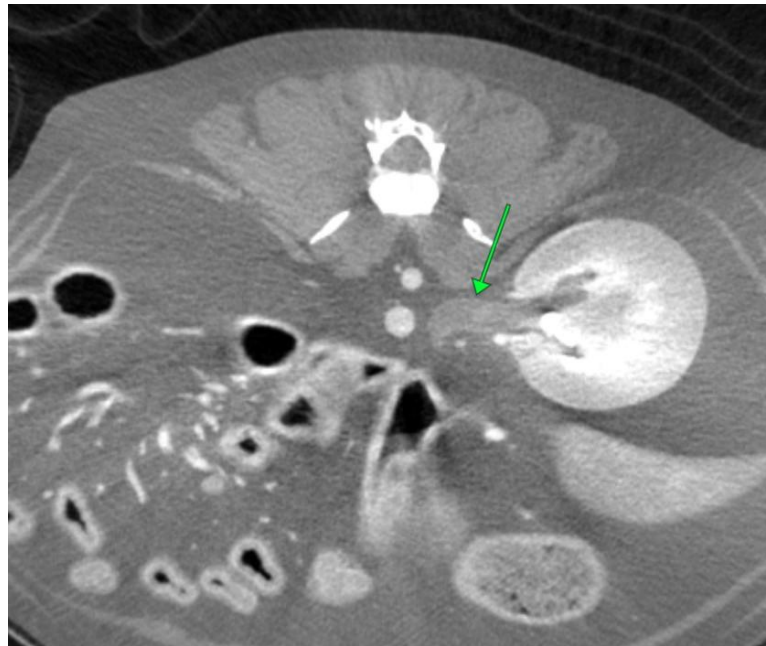
Multifocal spondylosis deformans is seen.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Left hydroureter: benign ureteral obstruction.
- Normal thorax
- No mediastinal masses seen

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

Hydroureter can be associated with ureteral stricture due to chronic inflammation, also the presence of "mucus plugs" should be considered. No masses seen. Urinalysis is recommended for possible chronic kidney disease. Cardiology consultation also recommended.





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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.

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Brittany Bethel, CVT

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.

Dr. Tais Guimarães, MV
info@sonopath.com

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