

PATIENT

Pickles Rosenthal

SPECIES

Canine

BREED

Poodle

SEX

MN

AGE

3Y

WEIGHT

9kg

INTERPRETED BY

Dr. Tais Guimarães,
MV

IMAGING PERFORMED BY

Mobile Pet Imaging

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Dr. Armstrong

INVOICE

75547

DATE

6-16-26

PRESENTING CLINICAL SIGNS

Pickles, a 3-year-old male neutered poodle mix, presented for follow-up evaluation of chronic, diffuse swelling of the left pelvic limb. A new concern of diarrhea has developed following a recent reduction in his prednisone dosage.

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN AND STIFLES

Survey and post contrast series are available for interpretation.

COMPUTED TOMOGRAPHIC FINDINGS

Abdomen

Both kidneys have normal volume, shape and attenuation. No stones seen.

Multiple small, rounded, uniformly enhancing splenic nodules are seen.

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

Normal liver size, shape and attenuation.

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

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

Iliac lymph nodes are enlarged, asymmetric, right side larger (R= 8.6mm wide; L= 4.6mm wide).

Diffuse subcutaneous swelling on pelvic region and more evident on left pelvic limb.

On the pelvic region, there are multiple comminuted fractures on the left ilium and left sacral wing, with irregular margins and extensive erosive lesions on cortical bone, associated with soft tissue swelling on gluteus muscles. Widening of the sacroiliac junction is noted on the left side. No evidence of periosteal reaction.

There is also a small erosive foci on the right sacroiliac joint.

Left Stifle

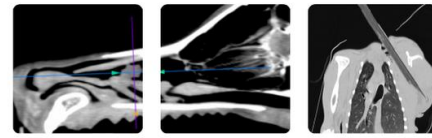
No joint effusion is seen. No osteophytes are seen. The tibia is not cranially subluxated. Popliteal LN is enlarged and homogeneous. Diffuse loss of bone density on distal portion of the left femur compared to the contralateral, no cortical lysis seen.

Right Stifle

No joint effusion is seen. No osteophytes are seen. The tibia is not cranially subluxated. Popliteal LN is enlarged and homogeneous.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Fracture on left sacroiliac junction and iliac wing with secondary erosive boney changes
- Normal stifles.
- Normal abdomen.



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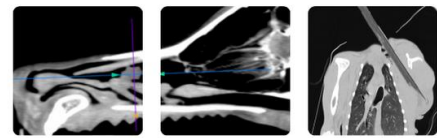
6-16-26

- Reactive lymphadenopathy

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

Imaging findings are suggestive of iliac fracture and sacroiliac disjunction, primary trauma is a possibility although not reported in the history. Secondary erosive changes can be associated with sacroiliitis (infectious is possible), possibility of nonunion / malunion is less likely. Histopathology and culture are recommended.





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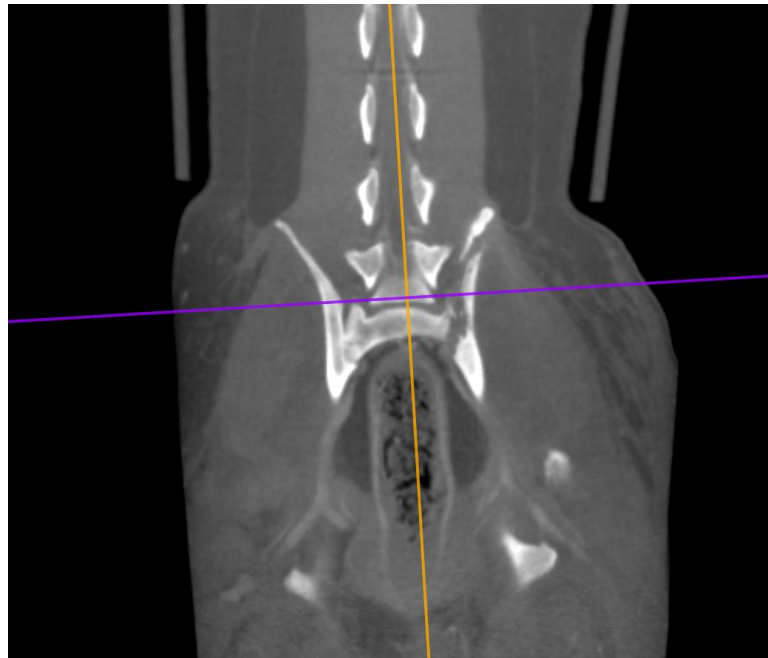
Dr. Armstrong

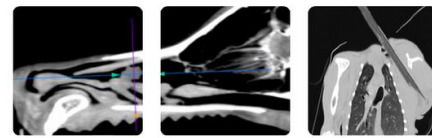
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Dr. Tais Guimarães, MV
info@sonopath.com