

**PATIENT**

Lench Kujak

PRESENTING CLINICAL SIGNS

Presenting for standard COHAT and extraction of 108 due to slab fracture. 307 extracted post ct scan

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE DENTAL ARCADES

Plain study available for review.

BREED

Giant Schnauzer

COMPUTED TOMOGRAPHIC FINDINGS

Severe multifocal resorptive lesions of the upper and lower molar and premolar teeth are seen.

There are severe resorptive lesions of all dental roots of the triadan 208 with severe periapical periodontal space widening with loss of the lamina dura and deep alveolar bone loss around all roots of the triadan 208. Periosteal new bone formation with brush bordered appearance is seen in the lateral surface of the left maxillary bone at this level.

SEX

MN

Severe resorptive lesions of both roots, necks, and crowns of the triadan 308 are present.

AGE

13 Years

The remainder of the resorptive lesions accentuate the triadans 309 and 209.

Vertical bone loss is seen in the incisor portion of the left mandible.

All canine teeth present horizontal abrasion.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Severe multifocal CORL with severe periapical abscessation of the triadan 208.
- Severe resorption of the triadan 308.
- Moderate to severe resorptive lesions of the triadans 209 and 309.

HOSPITAL NAME

South Bay Animal
Hospital & Pet Resort

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals moderate to severe multifocal resorptive lesions. The changes are most pronounced at the triadan 208 which reveals periapical abscessation and osteitis. The resorptive changes associated with the triadan 308 are also considered severe. Moderate to severe resorptive lesions are present at the triadans 209 and 309.

REFERRING VET

Dr. Rupashree Rao

INVOICE

49579

DATE

1-13-22



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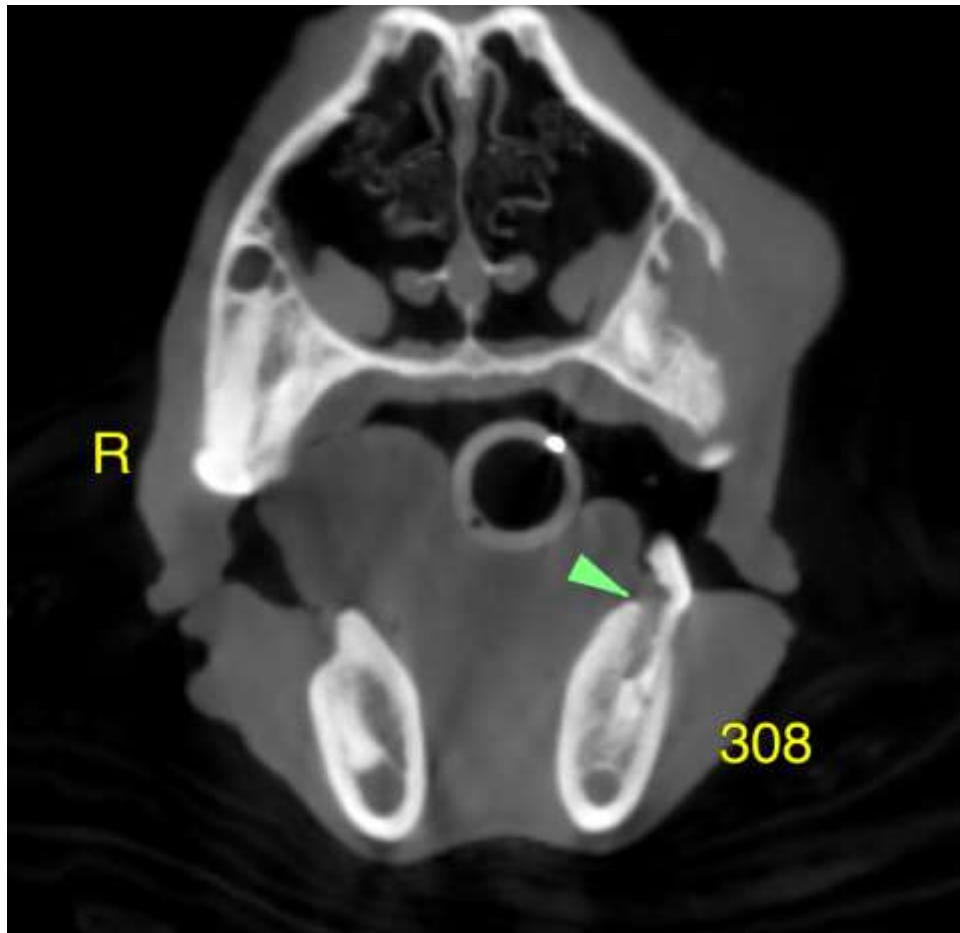
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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