



**PATIENT PRESENTING CLINICAL SIGNS**

Mindy Greenspun

Attached gingival mass left rostral maxilla (apical to the left maxillary second incisor first noticed by the family 1/25/23 and no change in size has been noted. Abnormal PE/Chem/CBC/UA Results: Diagnosis / Treatment Summary: Oral Mass 9 x 10 x 6 mm oval pink pale firm attached gingival mass with active contract enhancement and early-stage ossification involving the left maxillary second incisor (202). Treatment: Cone Beam CT Scan and Incisional Biopsy avoiding cellular spread and marginal alteration to determine type of neoplasia, prognosis and all potential treatment options to extend quality life. Tooth- External Root Resorption: Multiple Teeth with Varying degrees of external root resorption with no radiographic evidence of pathology. Treatment Recommendation: Surgical Extraction of those teeth with advanced Root Resorption. Fracture - Tooth Uncomplicated (pulp not exposed) crown fracture with no periapical pathology right maxillary fourth premolar (108). Uncomplicated (pulp not exposed) enamel fracture with no periapical pathology left maxillary fourth premolar, (208). Treatment Recommendation: Odontoplasty followed by placement of a light cured unfilled resin sealant. Hypodontia Hypodontia (Missing) Right and Left maxillary and mandibular first premolars (105, 205, 305, 405). History & Physical Exam Examination- Initial Oral - Subjective/Complaints: "Mindy" presented for oral examination for an oral mass first noted 1/25/23. "Mindy" is fed RC Urinary dry dog food. The Greenspun family do not currently practice regular home dental care and the last professional dental cleaning was performed 2021 with Dr. Shope DAVDC. Mindy has no known previous history of professional dental cleaning, maxillofacial trauma or oral surgery per the Greenspun family. "Mindy" medical history includes: Urocytoliths managed with cystotomy 4 years ago in MA. Positive testing 11/29/22 for asymptomatic Lymes (treated 4 years ago with Doxy) and Anaplasma. Mindy is not currently on any regular medications other than heartworm prevention per the Greenspun family. Dr. Dack evaluated "Mindy" on 1/23/23 for evaluation of an oral mass. At that time Dr. Dack noted a firm gingival mass apical to the left maxillary second incisor crown and recommended a referral to the Florida Animal Dentistry & Oral Surgery Center. On 1/25/23 Dr. Dack performed a complete chemistry, CBC, T4, U/A and Thoracic radiographs. The results were unremarkable other than: CREATINE KINASE 223 (10 200), WBC 4.5 (4.9 17.6), MCH 26.7 (21.9 26.1), NEUTROPHIL 2678 (2940 12670), MONOCYTE 99 (130 1150), Normal urine specific gravity 1032 with trace protein and Bacteria-marked cocci >40/HPF. Thoracic radiographs revealed: Equivocal prominent spleen. Abdominal ultrasound recommended. "Mindy" is currently eating, drinking and acting normally. Oro-Nasal: Calculus index 3/3, Plaque index 3/3, Gingivitis index 3/3. Halitosis, OM 9 x 10 x 6 mm oval pink pale firm attached gingival mass with early-stage ossification involving the left maxillary second incisor (202). T/FX/UCF right maxillary fourth premolar (108), T/FX/EF left maxillary fourth premolar (208). Missing right and left maxillary and mandibular first premolars (105, 205, 305, 405). Conscious oral examination was limited and further examination requires anesthesia.

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

Female

**AGE**

8

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**HOSPITAL NAME**

Florida Animal  
Dentistry and Oral  
Surgery Center

**REFERRING VET**

Mike Wiegand, DVM,  
DAVDC

**COMPUTED TOMOGRAPHIC STUDY OF THE DENTAL ARCADES**

Plain and post contrast studies available for review.

**INVOICE**

56577

**DATE**

2-5-23

**COMPUTED TOMOGRAPHIC FINDINGS**

A gingivostomal soft tissue nodule of approximately 11 x 6 x 9mm is seen rostrally adjacent to the triadan 202. The nodule presents focal internal mineralization/ossification. No evidence of aggressive osteolytic or osteoproliferative changes of the maxillary alveolar margin is seen. The triadan 202 appears to be in situ and intact. Moderate uniform enhancement is noted within the nodule on the post-contrast study.



**PATIENT**

Triadans 105, 205, 305, and 405 are absent.

Mindy Greenspun

Multiple dental roots present advanced resorptive changes accentuating the mesial roots of the triadans 109 and 209 which present resorption to a degree of fragmentation. The resorption involves the dental neck with a small round punched out lytic lesion of the distal root of the dental neck of the distal segment of the triadan 107.

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Superficial uncomplicated crown fractures of the mesial segments of the triadans 108 and 208 are seen.

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**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Gingivostomal soft tissue nodule with ossification/mineralization rostral to the triadan 202.
- Hypodontia.
- Uncomplicated crown fractures triadans 108 and 208.
- Multifocal advanced tooth root resorption with root fragmentation triadans 109 and 209.
- CORL lesion - triadan 107.

**SEX**

Female

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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A small gingivostomal soft tissue nodule is seen rostral to the triadan 202 with no evidence of aggressive osteolytic or osteoproliferative changes of the adjacent left maxillary alveolar margin. Invasiveness however cannot be ruled out. Differential diagnosis includes ossifying or acanthomatous epulis / ameloblastoma and less likely nonodontogenic soft tissue neoplasia such as early oral fibrosarcoma, melanoma, and other. Incisional biopsy was performed after the CT study for further definition and the further management depends on the correlation between the CT findings and the results of the histologic examination.

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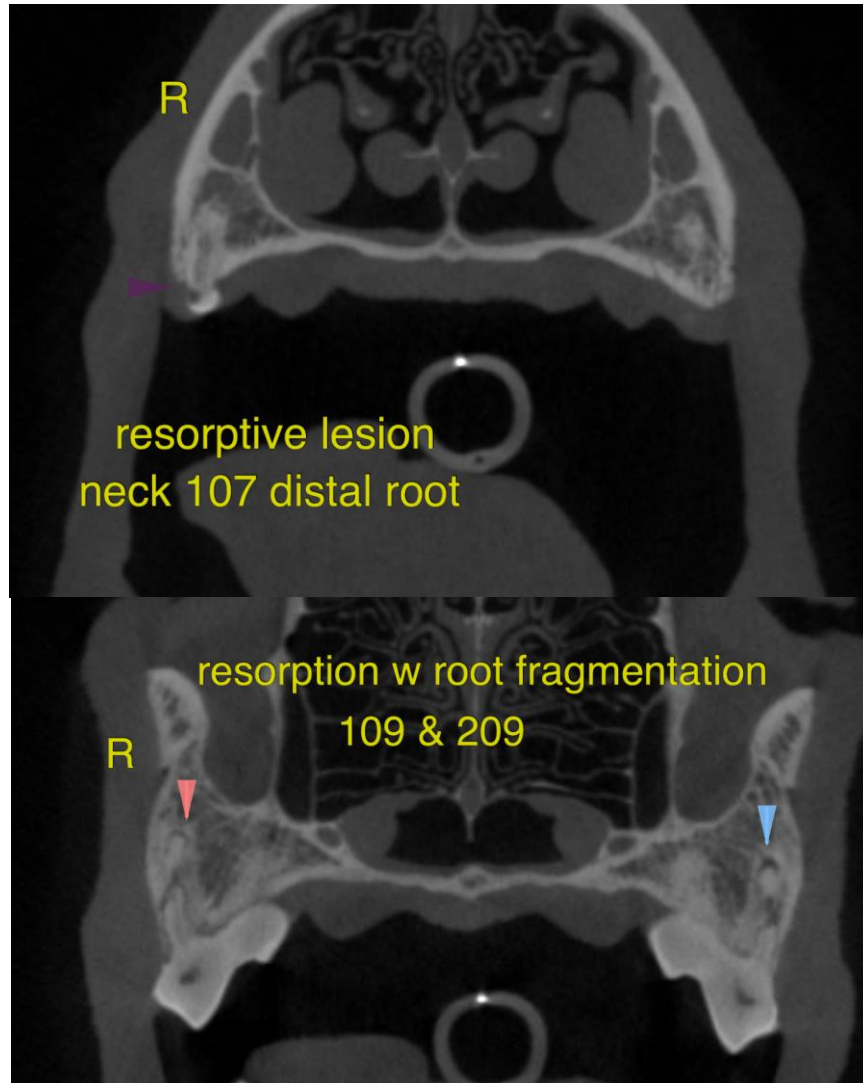
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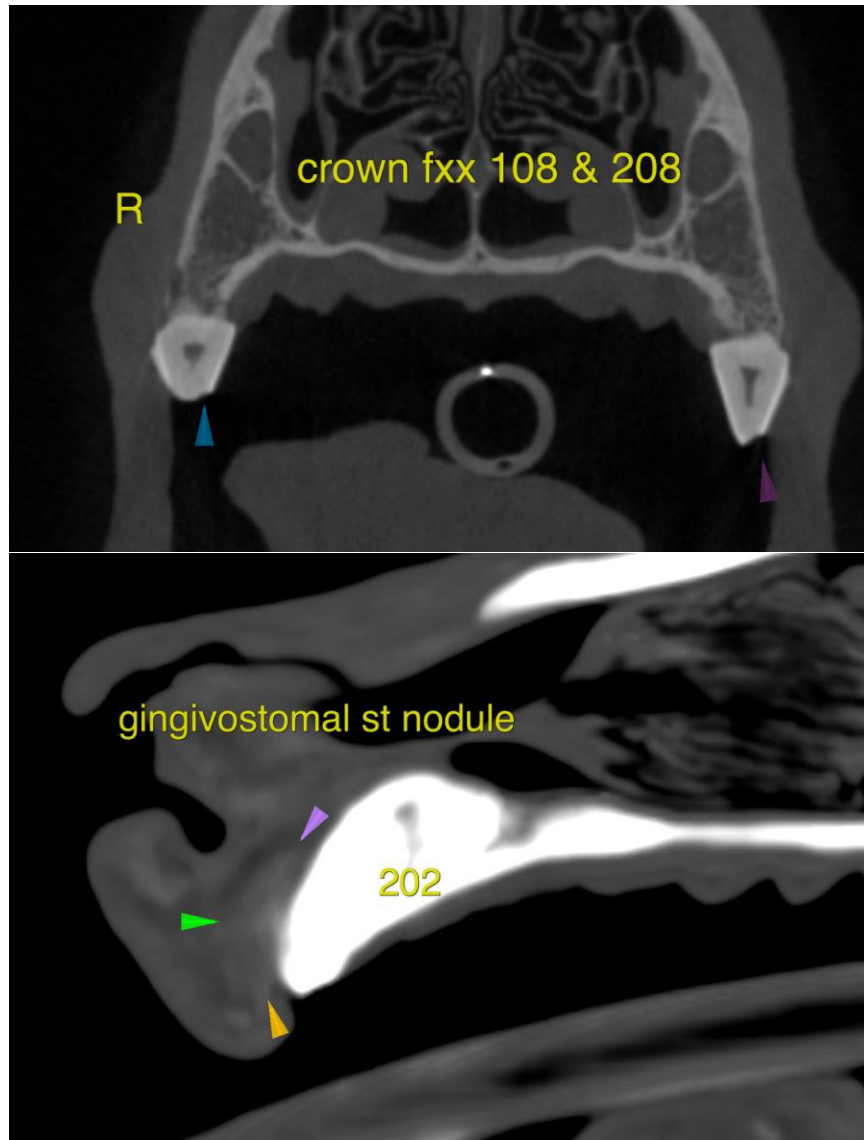
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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