



PATIENT PRESENTING CLINICAL SIGNS

Lulu Arellano
SPECIES Canine
BREED Boston Terrier
SEX Spayed Female

Dermatology consultation 3/22/22- presented for ear infection in the left ear that began several weeks ago. O reports a leave-in ear medication was applied, but this did not resolve the ear infection. Mometamax was started. O took Lulu to emergency vet due to blood coming out of the left ear. On Sunday, O reports that emergency veterinarian saw a lot of blood and liquid discharge in her ear. O reported that she was told that the ear drum was ruptured. O reports it was recommended that she stop Mometamax. Ear culture performed at emergency veterinary office and results are still pending. Pet had an eye infection in the right eye about 1 week ago, doing better now. She reports that this is her first ear infection. Years ago, she was diagnosed with food allergies and that she has done well with Ultamino. She occasionally has flare ups on her skin that she thinks are due to grass. Prior to the ear infection, she reports that Lulu was rolling in the mud after it rained.

Abnormal PE/Chem/CBC/UA Results: Left ear: mild tan/grey discharge in mid to proximal horizontal canal. Mass observed in proximal horizontal canal obstructing horizontal canal, unable to view TM. Right ear: No discharge seen in VC or HC. Tuft of hair in proximal horizontal canal and able to view a portion of pars tensa.

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies available for review.

AGE COMPUTED TOMOGRAPHIC FINDINGS

9 Years, 9 Months

The brain presents no deviation from normal anatomy and symmetry. The grey and white matter distinction and the neuroparenchymal attenuation are as expected. The distribution of contrast enhancement is within normal limits throughout the parenchyma and meninges. The ventricular system is non-dilated and within the limits of the expected volume and symmetry.

INTERPRETED BY

Nele Eley (Ondreka), DVM Dr. med. vet., DipECVDI

Thin and smoothly folded conchae and turbinates with even smooth mucosal lining.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

HOSPITAL NAME

Mobile Pet Imaging

A 1.5 x 0.5 cm sized elongated soft tissue attenuating mass with mildly nonuniform contrast enhancement is occupying and expanding the medial horizontal external auditory meatus on the left side. The mass extends into the lateral aspect of the tympanic bulla. The remainder of the left tympanic bulla presents aerated with smooth osseous lining. A mild amount of fluid attenuating material is seen within the horizontal external auditory meatus lateral of the mass. No evidence of extension beyond the limits of the ear canal is seen.

REFERRING VET

Meaux

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

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The dentition is incomplete with the triadans 104, 105, 106, 107, and 205 being absent.

DATE

3-28-22



PATIENT COMPUTED TOMOGRAPHIC DIAGNOSIS

Lulu Arellano

- Soft tissue mass within the left medial horizontal external auditory meatus.
- Mild concurrent otitis externa.
- No evidence of regional lymphadenomegaly.

SPECIES

Canine

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The CT study confirms presence of a small soft tissue mass within the left external auditory meatus. Differential diagnosis includes ceruminous cell carcinoma, adenocarcinoma, other soft tissue neoplasia, and less likely ear canal polyp. Final diagnosis will require sampling for histology. Excisional biopsy could be discussed versus ear canal ablation.

BREED

Boston Terrier

SEX

Spayed Female

AGE

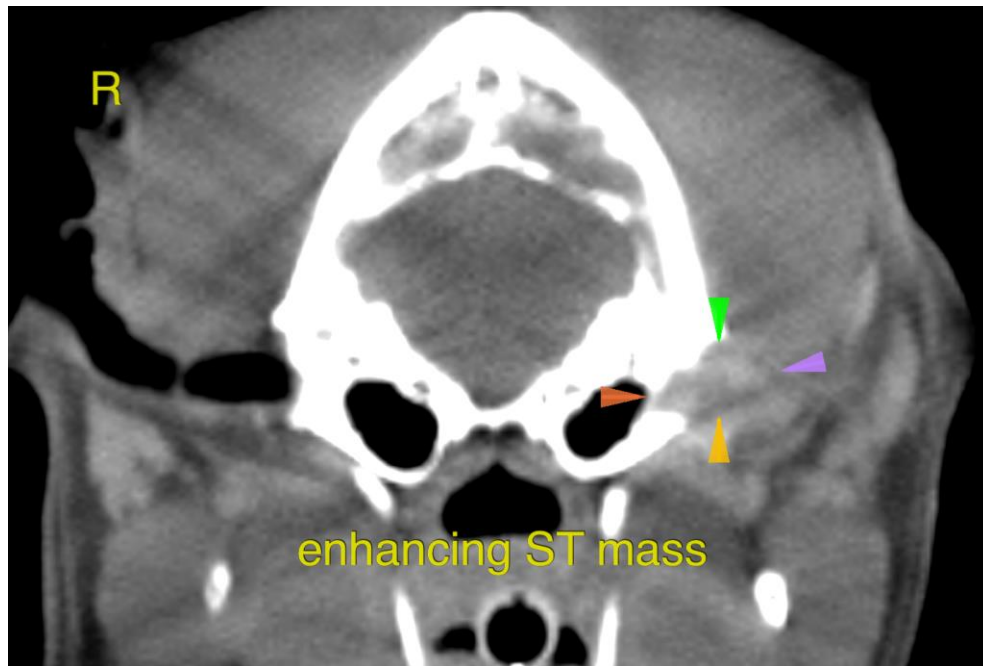
9 Years, 9 Months

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DipECVDI

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REFERRING VET

Meaux

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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