

**PATIENT**

Bear Sims

**SPECIES**

Canine

**BREED**

Tibetan Mastiff

**SEX**

Male

**AGE**

8

**INTERPRETED BY**Nele Eley, DVM  
Dr. med. Vet. DipECVDI**HOSPITAL NAME**Colyton Veterinary  
Hospital**REFERRING VET**

Chris Papantonio

**INVOICE**

51401

**DATE**

4-7-22

**PRESENTING CLINICAL SIGNS**

Presented for acute mass that has come up on RHS face. Has had similar issue in the past but went away. Systemically well, normothermic, EDDU ok, oral cavity clear, no masses seen, no obvious lymphadenopathy, No pain when mass palpated and mass seems to be only involving dermal and sub cutaneous tissue. Aspirated brown coloured liquid. Suspect abscess but want to rule out other causes like sialoceale or necrotic mass with abscessation.

**COMPUTED TOMOGRAPHIC STUDY OF THE HEAD**

Plain and post contrast studies available for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

A large thin walled fluid filled cavitory lesion is seen ventral of the right external auditory meatus and within the mandibular angle. The mass effect is extensive. The lesion measures approximately 15 x 12 cm and is not fully covered with the available field of view. Thick peripheral capsule with rim enhancement is seen. A large main cavity is present as well as multiple septations at the cranioventral and caudodorsal aspect of the cavitory lesion. The right mandibular salivary gland is severely stretched and compressed by the cavitory lesion. No evidence of foreign material, peripheral soft tissue swelling, or edema is seen.

The right medial retropharyngeal and cervical lymph nodes are mildly enlarged.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Suspect right sided cervical sialocele.
- Regional lymphadenomegaly of the right medial retropharyngeal and cervical lymph nodes.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Differential diagnosis generally includes sialocele as well as abscess; however, definitive signs of abscessation are lacking. There is no evidence of foreign material. The lesion is in contact with the mandibular salivary gland and hence sialocele is considered more likely based on the CT findings than an abscess. Tumor with central necrosis can basically be ruled out and further verification of the CT findings by means of aspiration and analysis of the fluid content is recommended.

The lymph node changes are compatible with reactive hyperplasia.



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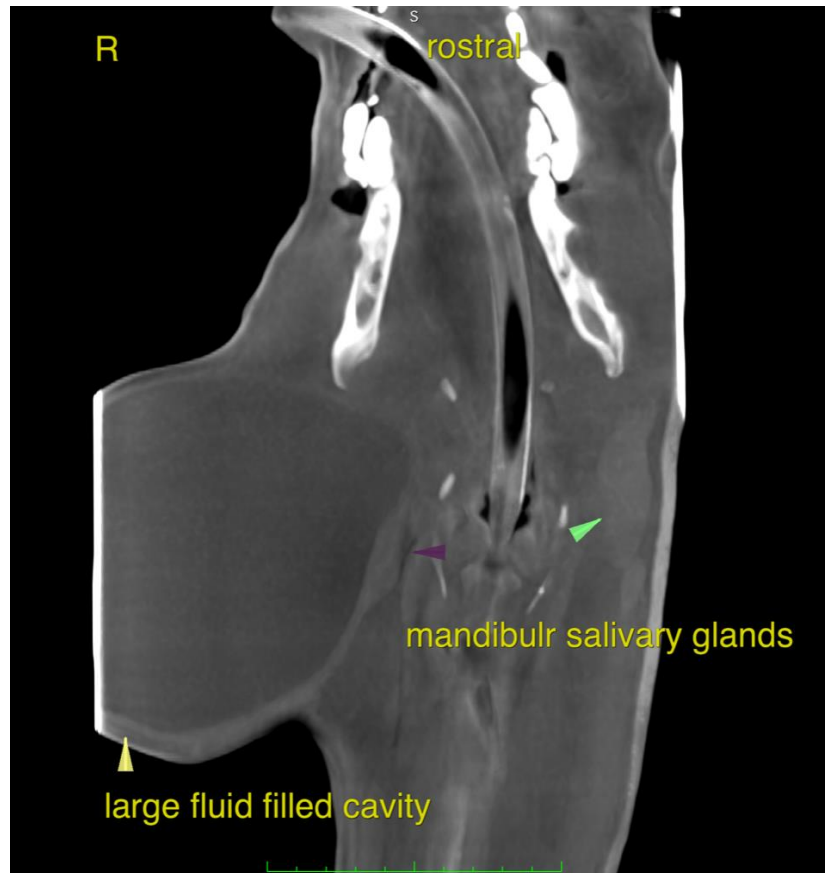
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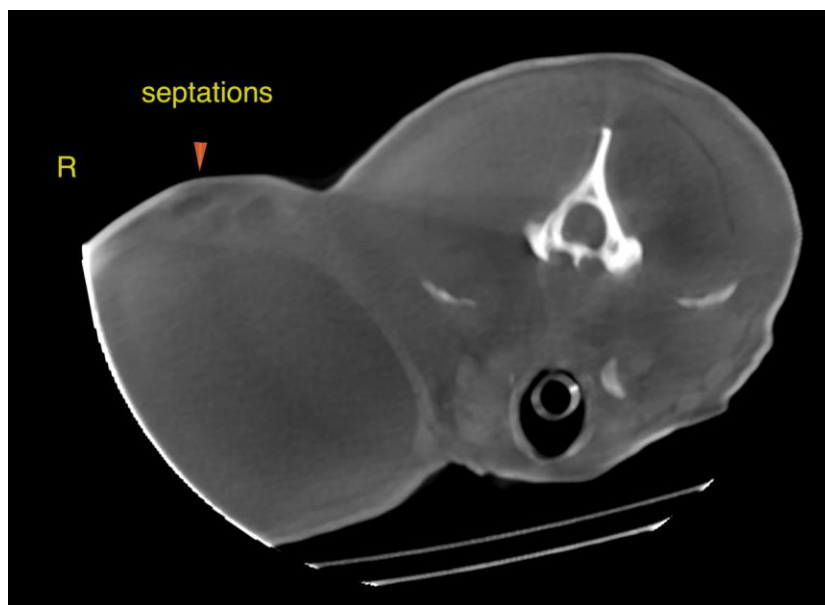
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

**BREED**

Tibetan Mastiff

**Nele Eley**, DVM, Dr. med. vet., DipECVDI  
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Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology  
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