



PATIENT

Abby Levine

PRESENTING CLINICAL SIGNS

RHL non weight bearing 1 wk, growth on RR paw pad for 8m, seizure last week.

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD, THORAX, ABDOMEN, & HIND LIMBS

Pre/post contrast studies provided for review.

BREED

Mastiff

COMPUTED TOMOGRAPHIC FINDINGS

Head:

There are some significant artifacts limiting the diagnostic value of the head images. As far as can be assessed the interhemispheric gap is in the midline with no evidence of a mass effect.

SEX

Spayed Female

Bony structures of skull and the skull foramina of the cranial nerves are laterally symmetrical and inconspicuous.

AGE

5 Years, 8 Months

Both tympanic bullae are completely ventilated with a regular tympanic bulla wall. External ear canals are narrowed in the horizontal section but ventilated. Marked metaplastic calcifications of the canal walls are recognized. The adjacent temporomandibular joints and the nasopharyngeal meatus have no particular findings.

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet
Specialist in
Diagnostic Imaging

Frontal sinuses and the orbital contents are laterally symmetrical without evidence of a retrobulbar lesion. Nasal cavities are ventilated regularly.

Thorax:

The lungs are regularly ventilated with close contact to the inner thoracic wall on all sides. There is very subtle free pleural fluid noted on the right.

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Pulmonary density presents multiple, small, mineralized spots predominantly in the pulmonary periphery. There is no evidence of focal or nodular pulmonary lesions.

REFERRING VET

Dr. Bill Langhofer

Granular opacities are detected in the cranial mediastinum which shows regular and density. Mediastinal (sternal, tracheal-, bronchial) lymph nodes are considered to be normal. Thoracic trachea and esophagus present as expected. Heart is inconspicuous as far as can be assessed with CT. Diaphragm is normal.

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The extra-thoracic soft tissues, thoracic spine as well as ribs and sternum are unremarkable. There is no evidence of bony lysis or abnormal sclerosis.

Abdomen:

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Liver and spleen show normal findings in terms of size, surface, shape and contrast behavior.

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Gallbladder is inconspicuous without evidence of cholestasis. Pancreas presents normal size and shape with a smooth surface. Unremarkable presentation of the bilaterally symmetrical kidneys.

Adrenal glands are in normal limits.

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Multiple concave fragments of foreign material are detected in the stomach. The gastric wall subjectively appears mildly thickened. All parts of intestine are regularly presented without any indication of a wall thickening or a mass. There are no signs of an obstructive or functional ileus. Ureters, urinary bladder, trigonum and urethra are presented as expected.

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Mastiff

Abdominal lymph nodes and abdominal vessels have no particular findings. Signs of peritoneal/retroperitoneal effusion or free gas are not recognized.

SEX

Spayed Female

Hind extremities:

The coxofemoral joints reveal prominent degenerative changes with remodeling of the femoral head/neck with smooth and even new bone formation at the level of the cranial and lateral joint space/acetabular rim.

AGE

5 Years, 8 Months

Both stifles present mild to moderate degenerative changes with formation of osteophytes and subtle cystic-erosive lesions of the subchondral bone.

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Tarsal joints and metatarsal structures are inconspicuous.

The pad of the 2nd digit of the right paw shows mild soft tissue swelling. Evidence of radiopaque foreign material or lysis/erosion of the adjacent bony structures is missing.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Assumed normal CT findings of the head
- Signs of a bilateral, breed-appropriate, chronic otitis externa
- No evidence of pulmonary/mediastinal metastasis
- Multiple pulmonary osteomas
- Fragmented foreign gastric body
- Severe bilateral coxarthrosis
- Mild to moderate arthrosis stifles
- Unspecific soft tissue swelling right 2nd paw pad

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT findings show no overt signs of a neoplastic or an inflammatory process. The unspecific swelling recognized at the level of the 2nd digit paw pad (right location?) at least presents no aggressive biological behavior assessed from a CT perspective. This does not exclude inflammatory/neoplastic processes of the soft tissues. FNA/biopsy are needed for further evaluation.



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Extraction of the fragmented gastric foreign body is recommended (clinically relevant?). Currently signs of a severe inflammatory process such as perifocal peritonitis/pancreatitis are not recognized.

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The degenerative changes of the hips and stifles are chronic issues and must correlated with the clinical presentation.

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Final assessment of the neurocranium is limited due to artifacts. Intra-axial lesions such as infarcts, small edema or low-grade neoplasia are difficult to recognize in CT and therefore not ruled out completely.

SEX

Spayed Female

TECHNICAL COMMENTS

Changes at the level of the right paw pad are subtle. Please give me a note if the assumed location described above does not match with the clinical results. I'll recheck the images then.

AGE

5 Years, 8 Months

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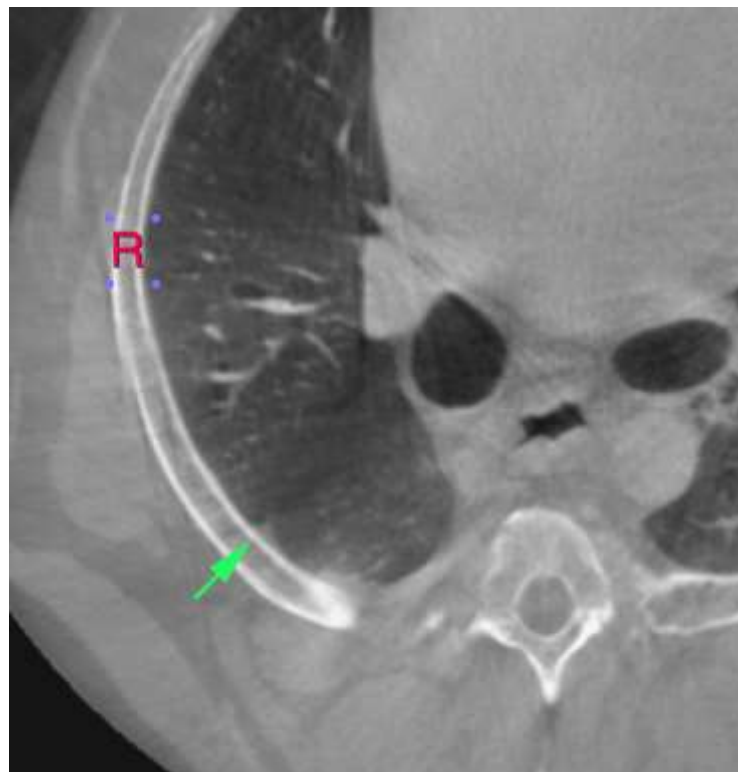
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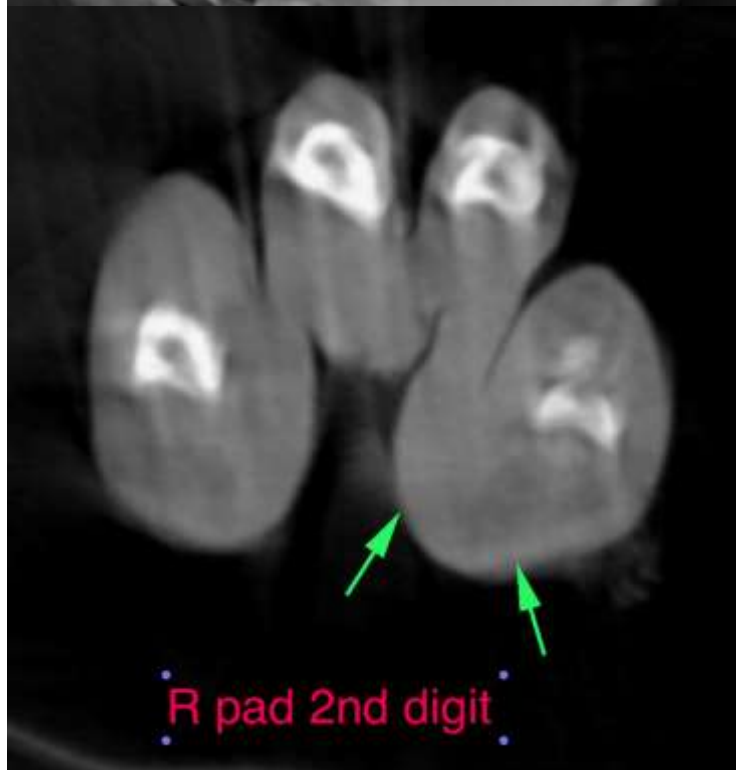
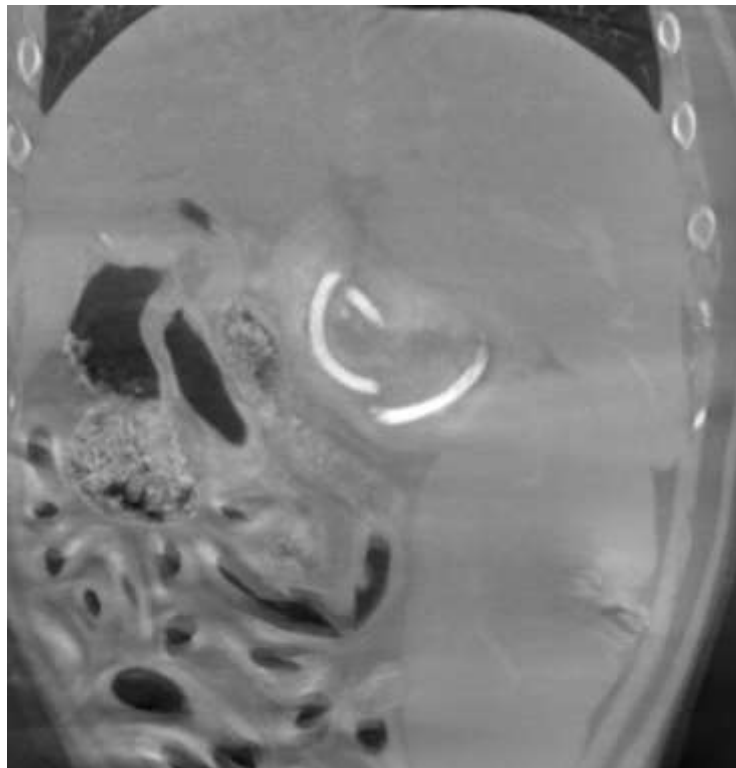
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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Mastiff

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