
PATIENT PRESENTING CLINICAL SIGNS

Rupert Serrano Rupert presents for continued management of an abscess associated with his right ear and salivary region. A CT was initially submitted pre-op 10/20/2021. Inv # 26518. A right sided TECA,LBO was performed 10/25/21. Patient returned almost immediately post-op with persistent abscess that was flushed and lavaged for several more weeks. Antimicrobials were initiated based on culture and sensitivity. Due to lack of improvement an exploration of the salivary region was performed on 12/2. Histopath revealed salivary and muscle tissue as well as two reactive lymph nodes. Patient has since presented for wound lavage and antimicrobial therapy. Due to persistence, a repeat CT was performed today to guide future recommendations.

SPECIES

Canine

BREED

Bulldog

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL

A high resolution pre- and post-contrast CT study of the skull is provided for review.

SEX

Male

COMPUTED TOMOGRAPHIC FINDINGS

The dental changes are stationary compared to the previous CT study of the skull.

AGE

11 Years

There is a moderate mild contrast enhancing swelling visible in the region of the absent right external ear canal, with multiple gas inclusions along the previous course of the right external ear canal. The swelling is extending ventrally up into the right submandibular region. In the right submandibular region, lateral to the right mandibular salivary gland, an ill-defined, significant soft tissue swelling with marked fat-stranding of the subcutaneous fat is seen. Post contrast administration, within the right sided submandibular swelling, a fluid attenuating region is demarcated by a peripheral contrast enhancing thickened membrane, measuring 4.0 x 1.8 x 6.5 cm in size. There is a thin stalk like contrast enhancing structure extending from the cavitary lesion dorsally and medially, up to the external acoustic porus. The right tympanic bulla contains a moderate amount of non-contrast enhancing soft tissue material.

INTERPRETED BY

 Sebastian Schaub,
 DVM Dr. med. vet.
 DipECVDI

Stationary stenosis and marked dystrophic mineralization of the left external ear canal. Chronic left sided otitis media.

HOSPITAL NAME

Suncoast ER

Bilaterally moderate periauricular mineralization of the retropharyngeal soft tissues is seen, stationary in comparison to the preceding CT study.

REFERRING VET

Dr. Byron Young

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

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

INVOICE

34256

The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.

DATE

1/14/22

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.



PATIENT COMPUTED TOMOGRAPHIC DIAGNOSIS

Rupert Serrano

- History of right sided total ear canal ablation and lateral bulla osteotomy due to advanced chronic otitis externa and media with persistent recurrent abscess formation
- Cavitory lesion right submandibular region and septic steatitis – with possible fistulous tract originating from the osseous margins of the right lateral tympanic bulla.

SPECIES

Canine

- Left sided advanced otitis externa & media
- Advanced metaplasia formation in the periphery of the tympanic bullae
- Multiple absent teeth

BREED INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Bulldog

The findings level with the absent right external ear canal are fitting the history of recurrent abscess formation and possible fistulous tissue formation with central mild amount of gas. There is a cavitory lesion in the right submandibular region, ventral to the level of the right external ear canal, appears to be connected to the lateral osseous margin of the right tympanic bulla – theoretically sialoceles formation is a potential in this location, but regarding the history abscess is already confirmed.

SEX

Male

AGE

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I suppose that surgical exploration along the course of the right external ear canal with resection of potential fistulous tissue and possible retained epithelial or cartilaginous material is the therapy of choice – going down to the tympanic bulla. Drainage of the abscess ventral is indicated as well.

INTERPRETED BY

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

HOSPITAL NAME

Suncoast ER

REFERRING VET

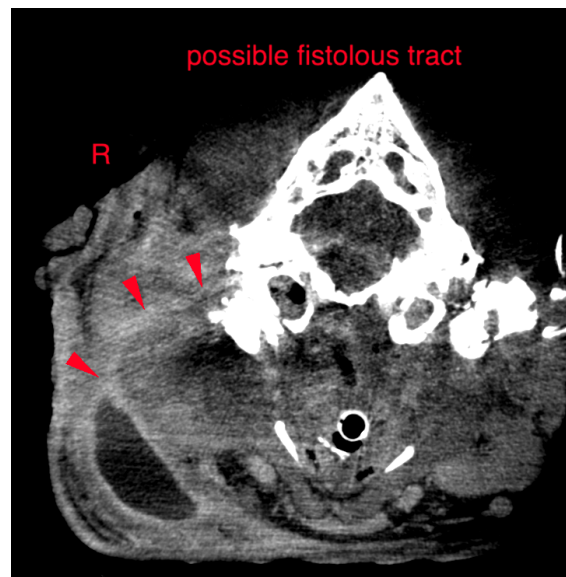
Dr. Byron Young

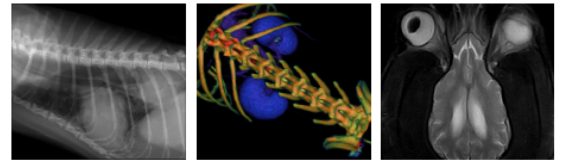
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1/14/22





PATIENT

Rupert Serrano

SPECIES

Canine

BREED

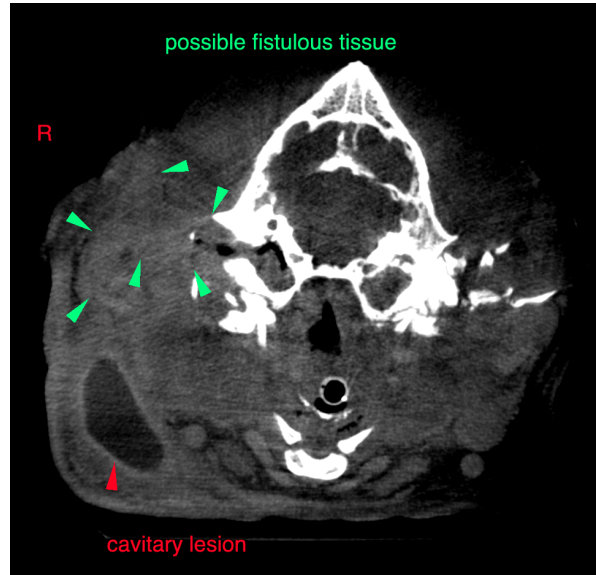
Bulldog

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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.

INTERPRETED BY

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

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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HOSPITAL NAME

Suncoast ER

REFERRING VET

Dr. Byron Young

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