



PATIENT PRESENTING CLINICAL SIGNS

Gomez Gussie McManus
SPECIES Canine
BREED Bull Dog
SEX Male
AGE 9

History: Oral Mass 9 x 7 x 7 cm oblong, pink pale ulcerated left mandibular mass with marked permeative osteolytic bone expansion and palisading periosteal reaction extending from and including the left mandibular third premolar to the rostral coronal process of the mandible (307-coronoid process) with mobile linguoverted left mandibular second molar. Treatment: Advanced imaging Cone Beam CT with and without contrast and incisional biopsy to determine type of neoplasia, prognosis and all potential treatment options to extend Gomez's quality life. Tooth- Root Resorption: Advanced Root resorption: Right maxillary second incisor, left maxillary canine, first, third premolars, right and left mandibular fourth premolars, left mandibular third premolar, right mandibular second premolar (102, 204, 205, 207, 307, 308, 406, 408). Treatment Recommendation: Surgical Extraction. Retained Tooth Roots Retained Tooth Roots: Right and Left mandibular first incisors (301, 401). Treatment Recommendation: Surgical Extraction. Gingival Enlargement Generalized Gingival Enlargement with no evidence of radiographic pathology. Treatment Recommendation: Gingivectomy / Gingivoplasty to resolve the pseudo-periodontal pockets. Malocclusion - class 3, Non traumatic Breed specific malocclusion III. Treatment not indicated. Abnormal PE/Chem/CBC/UA Results: In addition to the above irregularities : Musculoskeletal: Marked left >>> right temporalis muscle atrophy. On 1-12-23 a complete chemistry, CBC, T4, U/A was performed, and the results were unremarkable other than: Glob. 3.7 (1.6-3.6), ALKP 206 (5-131), MCV 80 (58-79), Platelet Count 614 (170-400), Normal urine specific gravity 1046 with 1+ protein, sperm otherwise quiescent sediment.

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL

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

INTERPRETED BY

Sebastian Schaub,
 DVM Dr. med. vet.
 DipECVDI

COMPUTED TOMOGRAPHIC FINDINGS

Multiple teeth are absent. The pulp cavity of triadan 204 is markedly widened and contains irregular mineralized material. Ankylosis of the root of triadan 204 is appreciated.

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The left body of the mandible and the ramus of the left mandible present an ill-defined zone with extensive osteolysis and immature periosteal new bone formation. A heterogeneous contrast enhancing soft tissue swelling is seen along the zones of osteolysis of the left mandible extending up into the left masseter muscle. The osteolytic lesions & periosteal new bone formation can be appreciated up to the level 308. Triadan 309 and 310 are deviated in a lingual direction from the alveolar crest by the mandibular mass.

REFERRING VET

Dr. Mike Weigand

The volume of the left temporal musculature is moderately decreased.

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

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

DATE

1/20/23



PATIENT

Gomez Gussie
McManus

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals present a thickened wall and advanced shell-like mineralization of the wall.

The lateral ventricles of the brain are prominent.

SPECIES

Canine

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

BREED

Bull Dog

- Monostotic aggressive osteolytic lesion left mandible
- Chronic otitis externa with dystrophic mineralization of the external ear canals, no evidence of concomitant otitis media
- Non-vital triadan 204 – with chronic periodontal disease with ankylosis of the root
- Multiple absent teeth
- Ventriculomegaly – incidental finding

SEX

Male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

9

The findings are fitting the history of an aggressive bone lesion originating from the left mandible – such as squamous cell carcinoma, melanoma, osteosarcoma, biopsy has already been performed regarding the history and results are pending. Surgical excision of the mass by left sided subtotal hemimandibulectomy is considered feasible – rostral osteotomy line should be distal to triadan 304 and include the entire ramus of the left mandible.

INTERPRETED BY

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

The atrophy of the left temporal muscle is considered as a sequela to disuse – no abnormalities are appreciated along the intracranial course of the trigeminal nerve. Consider full tumor staging.

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Dr. Mike Weigand

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.

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