



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Zeke Taylor  
**SPECIES** Canine  
**BREED** Mixed

History: Right Side masseter Atrophy Mass 2: Cyst on neck, 1 in across, in sc layer Mass 3: on neck, 1 cm across Mass 4: long mass dangling from caudal abdomen Mass 1: Left Shoulder, large, diffusely adhered to tissue beneath, very firm soft tissue, 6 in x 3 in. Biopsy Results of Mass 1: There is no evidence of malignancy in either sample. A lipoma cannot be ruled out, but based upon your description of the calcified appearance on CTscan, I am concerned that the samples, are not representative of the primary lesion and instead represent soft tissue displaced by an underlying/adjacent inflammatory or neoplastic process. If your clinical index of suspicion for malignancy is high, additional biopsy may be warranted to further rule out or confirm this differential.

**COMPUTED TOMOGRAPHIC STUDY OF THE SKULL & THORAX**

**SEX** Neutered Male  
 A high resolution pre- and post-contrast CT study of the skull and thorax is provided for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

**Skull**

**AGE** 10  
 The pictured parts of the dentition are complete and unremarkable in all jaw quadrants.  
 The volume of the right temporal and masseter muscle is moderately decreased.

**INTERPRETED BY**

Sebastian Schaub,  
 DVM Dr. med. vet.  
 DipECVDI

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.

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Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals are within normal limits.

**REFERRING VET**

Dr. O'Connor

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. The right trigeminal canal is mildly widened in comparison to the left side and there is subjective increased contrast enhancement along the course of the right trigeminal nerve.

**INVOICE**

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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.

In the subcutaneous tissue at the cranioventral aspect of the neck, a well-defined, spherical, uniform soft tissue attenuating mass is seen, measuring 3.0 cm in diameter.

**DATE**

1/27/23



**PATIENT** The thyroid glands bilaterally are within normal limits for size, shape and attenuation behavior.

Zeke Taylor **Thorax**

**SPECIES** In the left epaxial musculature, level with the spinous process of T2 to T8, a cauliflower like mineralizing and heterogeneous contrast enhancing mass is seen, measuring approximately 14.9 x 6.0 x 10.0 cm in size. The mass is crossing the midline level with T5/T6, extending into the right epaxial musculature. The mineralizing mass appears to be centered on the spinous process of T5 that presents sclerosis and moth eaten osteolytic lesions.

Canine

**BREED** The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

Mixed

**SEX** The cardiovascular structures including the pulmonary vasculature are within normal limits.

Neutered Male

Multifocal throughout the lung parenchyma, irregular shaped and mild ill-defined, nodular lesions of variable size are appreciated. The pulmonary nodular lesions are soft tissue attenuating and partially present irregular central mineralization.

**AGE**

10

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

- Mineralizing mass left epaxial musculature
- Structured nodular interstitial lung pattern, partially mineralizing
- Suspect thickening and increased contrast enhancement of the right trigeminal nerve
- Neurogenic muscle atrophy right masticatory muscles
- Subcutaneous (cystic) mass ventral aspect of the neck

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The mineralizing mass extending along the left epaxial musculature is highly suggestive for primary osseous neoplasm – potentially originating from the spinous process of T5 – such as chondrosarcoma or (periosteal) osteosarcoma. Secondary pulmonary metastatic disease.

**REFERRING VET**

Dr. O'Connor

The enlarged right trigeminal nerve represents likely a second entity and peripheral malignant nerve sheath tumor or neuritis are potentials. The finding is explaining the clinically appreciated atrophy of the right masticatory muscles.

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**PATIENT**

Zeke Taylor

**SPECIES**

Canine

**BREED**

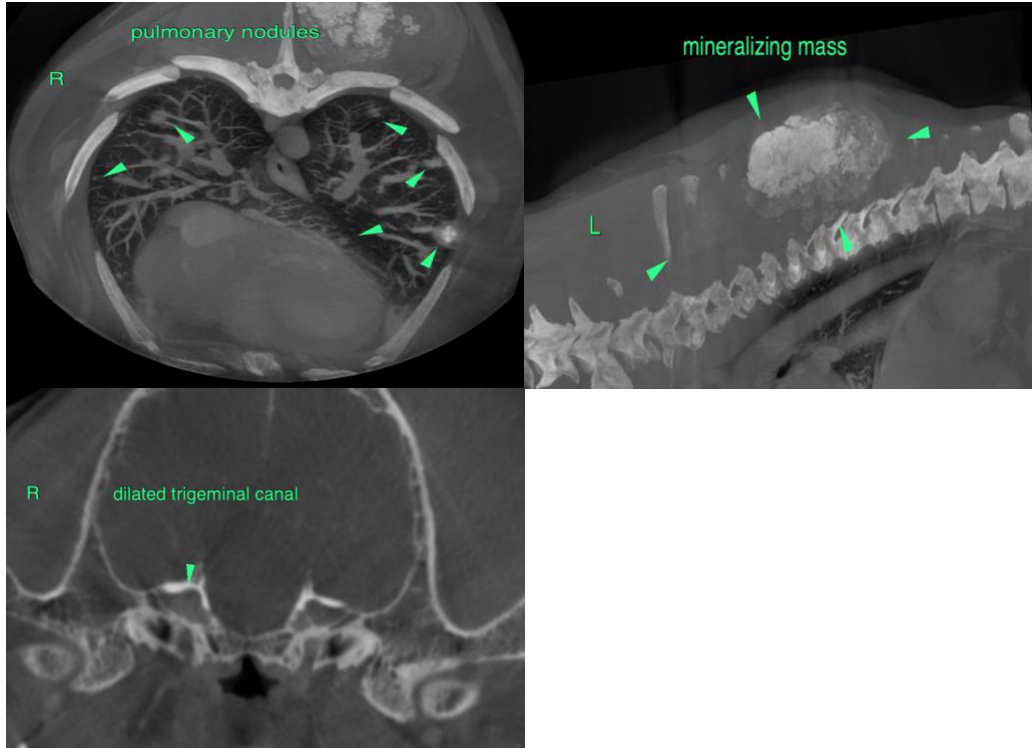
Mixed

**SEX**

Neutered Male

**AGE**

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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.**

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
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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.

**HOSPITAL NAME**

Holy Family VH

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
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**REFERRING VET**

Dr. O'Connor

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