



PATIENT

Coco Cooper

SPECIES

Canine

BREED

French Bulldog

SEX

Female

AGE

5 Years

WEIGHT

9.5

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Dayna Evans

HOSPITAL NAME

Animal Trust Ellesmere
Port

REFERRING VET

Dr. Amber Mahon

INVOICE

35216

DATE

1/3/26

PRESENTING CLINICAL SIGNS

History: Inspiratory dyspnea, mm pink CRT 2 sec, clear discharge from nose, abdo palp comfy NAD, cardiothoracic exam NAD - no adventitious lungs sounds, referred URT noise, can hear increased noise on expiration, RR 12 temp 38.4oC BCS 3/9 ears stenotic ++ with discharge Diagnosis: URT obstruction TFAST, poss area of consolidated lung on L side of chest but difficult to fully assess due to anatomy of ribs R side can visualize heart, no pericardial effusion noted bloods - mild increase in WBCs with band neuts, mild changes to electrolytes - likely due to vomiting.

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL & NECK

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

COMPUTED TOMOGRAPHIC FINDINGS

The skull has a brachycephalic conformation with significant crowding and rotation of the maxillary premolar teeth.

Multiple teeth are absent. Triadan 102, 103, 106-109, 406, 409 and 410 present a widening of the periodontal space, triadan 106 and 107 are perforating the right nasal cavity.

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining. The soft palate is thickened, measuring up to 13 mm in height.

The oropharynx is partially collapsed and obliterated by peripheral contrast enhancing ill-defined material – merging with the larynx caudally. The larynx is asymmetric, and the right aspect of the larynx is swollen and presents a heterogeneous contrast enhancement pattern.

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

Both tympanic bullae are obliterated by fluid attenuating material. The external ear canals present a moderate thickened wall, and the lumen of the external ear canals is narrowed.

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 medial retropharyngeal lymph node is prominent.

The cervical segment of the esophagus is moderately distended by gas.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right sided pharyngeal/laryngeal soft tissue mass with partial upper airway obstruction
- Lymphadenopathy right medial retropharyngeal lymph node
- Thickened soft palate
- Advanced periodontal disease 102, 103, 106-109, 406, 409 and 410 with perforation of the right nasal cavity

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS



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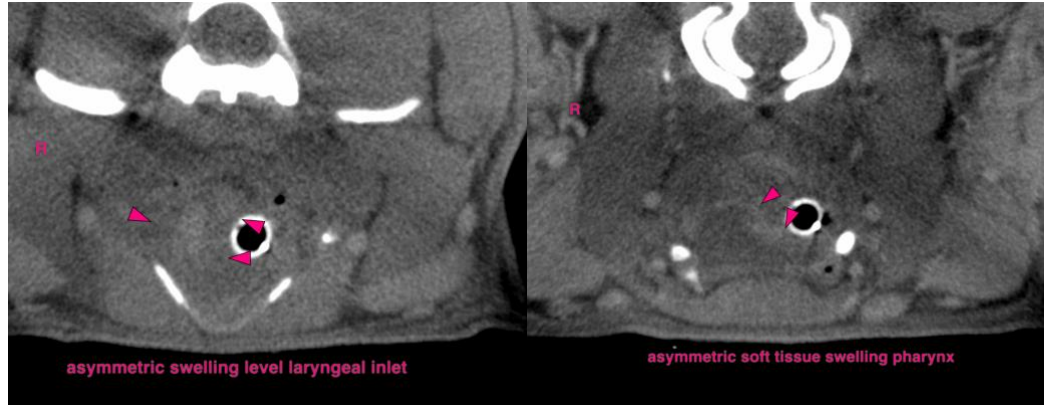
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The diffuse right sided soft tissue swelling of the pharynx & larynx can be inflammatory in origin – such as granuloma secondary to chronic brachycephalic obstructive airway syndrome – or caused by neoplastic transformation (e.g. melanoma, round cell tumor, squamous cell carcinoma). If not done so yet, pharyngoscopy/laryngoscopy including sampling is mandatory for further definition.



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.

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.

Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com