



PATIENT

Roxy Price

SPECIES

Canine

BREED

Not Provided

SEX

Spayed Female

AGE

7 Years

WEIGHT

40 Pounds

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Alisha

HOSPITAL NAME

Petroglyph AH

REFERRING VET

Dr. Alice Ku

INVOICE

35647

DATE

1/30/26

PRESENTING CLINICAL SIGNS

Temporalis muscle atrophy and weight loss was noticed early this month and since labs were unremarkable was started on prednisone after autoantibodies for MMM came back negative. Then came in on 1/23 for a "sore" to be evaluated. This was then diagnosed as a mast cell tumor via needle biopsy and chest rads showed a nodule in the cranial lungs on a right lateral projection. Pet then presented today 1/30 for mass removal and a skull, thorax and abdomen CT for staging of cancer and to look for a reason for weight loss and decreased appetite.

Abnormal PE/Chem/CBC/UA Results: Mild ALT elevation 282, mild ALP elevation 444 and CBC was unremarkable.

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL, THORAX AND ABDOMEN

A high-resolution post-contrast CT study of the skull, thorax and abdomen and a post-contrast CT study of the thorax is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Skull

Triadan 208 and 411 are absent.

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.

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.

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. Along the course of the trigeminal nerve bilaterally, no overt abnormalities are appreciated.

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.

Thorax

The most ventral aspects of the thorax and lung are cropped by the field of view.

The bony and surrounding soft tissue structures are within normal limits.

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.

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



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The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior.

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

Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.

The pancreas is evenly contoured; the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Normal skull, but absent dental elements 208 and 411
- Normal thorax
- Normal abdomen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals no clinically relevant abnormalities; there is no evidence of pulmonary metastatic disease. Complementing tumor staging of mast-cell tumor by FNA sampling of the spleen and liver is beneficial.

An underlying cause for the described muscle wasting of the temporal muscles and weight loss cannot be specified.

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



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can be of any further assistance please contact me.

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info@sonopath.com

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