



PATIENT

Charlie Abbot

PRESENTING CLINICAL SIGNS

Chronic history of sneezing for a few months. No nasal discharge. No improvement with antibiotic treatment. Diagnosed diabetes mellitus. History of elevated marked ALKP, ALT, AST and TBIL TBIL elevation resolved with medical management. ALT and ALKP remain mildly elevated

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL, THORAX AND ABDOMEN

A pre- and post-contrast CT study of the skull, thorax and abdomen in a bone, lung and soft tissue reconstruction is provided for review.

BREED

Corgi X

COMPUTED TOMOGRAPHIC FINDINGS

Skull

Multiple teeth are absent.

SEX

FN

In both nasal cavities a moderate amount of fluid attenuating material is attached to the nasal mucosal lining and extending up into the choana. Mild destruction of the nasal conchal structures is appreciated. The frontal sinus bilaterally contains gravity dependent, soft tissue attenuating material.

AGE

15 Years

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

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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.

The osseous and soft tissue structures of the neck are within normal limits.

REFERRING VET

Dalton Nguyen

Thorax

Multifocal mild striated mineralization along the fascial planes of the shoulder muscles and the axial musculature is appreciated.

A well-defined ovoid shaped soft tissue attenuating nodule is seen in the subcutaneous tissue dorsal to the cranial thoracic spine.

INVOICE

56493

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.

DATE

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

The bronchial walls are mildly prominent.

The lung parenchyma presents the expected architecture and attenuation behavior.



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Abdomen

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

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Both kidneys present within normal limits for size, shape and organ architecture. A small amount of mineral attenuating material is associated with the renal pelvis bilaterally. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted. A small amount of sedimented mineral attenuating material is seen on the ventral urinary bladder wall.

BREED

Corgi X

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

The spleen presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

SEX

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The hepatic volume is increased and the liver is protruding caudally beyond the costal arch, the caudoventral margins are rounded. The hepatic parenchyma is uniform soft tissue attenuating and has a uniform contrast enhancement pattern.

AGE

15 Years

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Destructive rhinitis
- Mild bronchial lung pattern
- Mild bladder sand
- Nephrolithiasis without signs of obstruction
- Calcinosis cutis
- Non-specific subcutaneous soft tissue nodule dorsal to cranial thoracic spine
- Multiple absent teeth

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The computed tomographic findings are highly suggestive for chronic non-specific rhinitis (e.g. lymphocytic plasmocytic, eosinophilic) ± bacterial superinfection. The changes noted are not typical of fungal rhinitis or a foreign body related rhinitis. There is no evidence of neoplastic disease. Rhinoscopy including sampling for histopathology and microbial sampling can be used as advanced diagnostic test.

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The mild bronchial pattern can be a sequela to accompanying primary inflammatory non-infectious bronchitis.

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Potentials for the hepatomegaly include metabolic hepatic disease, hepatitis or diffuse neoplastic infiltration. In case of doubt, ultrasound guided FNA sampling and/or Tru-cut biopsy can be used as minimally invasive methods for further workup.

The calcinosis cutis might be a sequela to hyperadrenocorticism or iatrogenic due to external



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glucocorticoid administration. Consider testing of the pituitary adrenal axis – no abnormalities of the pituitary or adrenals is appreciated in the current CT study.

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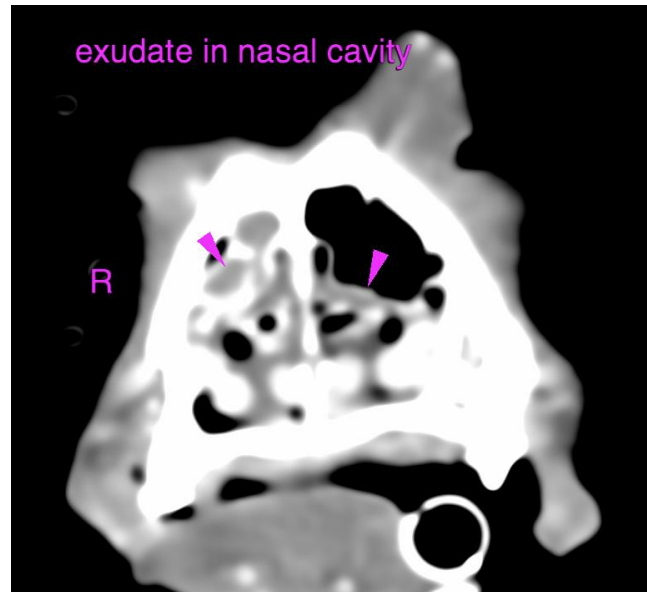
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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