



PATIENT

Steven Hernandez

SPECIES

Canine

BREED

Boston Terrier

SEX

Intact Male

AGE

8Y

WEIGHT

21lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

HVSFA

HOSPITAL NAME

Hospital Veterinario
San Francisco de Asis

REFERRING VET

Meaux

INVOICE

73260

DATE

1-8-26

PRESENTING CLINICAL SIGNS

Left ear mass with foul odor, purulent discharge present for 3-4 weeks. Testicular mass. CT to further evaluate ear mass, thorax, and abdomen staging.

COMPUTED TOMOGRAPHY OF THE SKULL, THORAX AND ABDOMEN

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

COMPUTED TOMOGRAPHIC FINDINGS

Skull

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

Triadan 305, 306, 311, 405, 406 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.

The left tympanic bulla contains a small volume of gravity dependent, non-contrast enhancing soft tissue material. The vertical segment of the left external ear canal is obliterated by an intraluminal, uniform soft tissue attenuating and heterogeneous contrast enhancing mass, presenting broad contact to the underlying wall of the ear canal that is segmentally dilated by the mass effect. The medial segment of the left external ear canal is filled with fluid attenuating material. Ventral to the horizontal segment of the left external ear canal and in the subcutaneous tissue lateral to the left ear canal, a diffuse soft tissue swelling with a central gas inclusion and heterogeneous contrast enhancement is seen.

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 left medial retropharyngeal lymph node is moderately enlarged, rounded and has a heterogeneous contrast enhancement pattern.

Thorax

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 pulmonary arteries of the caudal lung lobes are dilated and mildly tortuous, L>R.

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.



PATIENT

Steven Hernandez

SPECIES

Canine

BREED

Boston Terrier

SEX

Intact Male

AGE

8Y

WEIGHT

21lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

HVSFA

HOSPITAL NAME

Hospital Veterinario
San Francisco de Asis

REFERRING VET

Meaux

INVOICE

73260

DATE

1-8-26

Abdomen

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

The left kidney presents multifocal faint pinpoint mineralization of the parenchyma. Post contrast administration, throughout the renal parenchyma, well-defined, roundish parenchymal filling defects are seen; measuring <3 mm.

The renal lymph nodes are moderately prominent and present an irregular contrast enhancement pattern.

The prostate is symmetrically enlarged; uniform soft tissue attenuating and has an irregular contrast enhancement pattern. The right testicle is enlarged and presents an intraparenchymal irregular contrast enhancing mass.

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 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 hypogastric lymph nodes are prominent.

Peritoneal fat is protruding into the subcutaneous tissue of the perineal region bilaterally, L>R.

The vertebral endplates of the lumbosacral junction present moderate spondylosis formation.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Soft tissue mass left external ear canal with mechanical obstruction
- Secondary left sided otitis externa with perforation of the ear canal and periauricular septic cellulitis
- Lymphadenopathy left medial retropharyngeal lymph node – equivocal for reactive lymphoid hyperplasia versus metastatic spread
- Right testicular soft tissue mass
- Benign prostatic hyperplasia with intraprostatic cysts
- Lymphadenopathy renal and hypogastric lymph nodes
- Bilateral mild perineal hernia
- Enlarged pulmonary arteries caudal lung lobes
- Multiple simple renal cortical cysts
- No evidence of pulmonary metastatic disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The right auricular soft tissue mass is consistent with primary neoplasia of the ear canal – such as ceruminous gland adenocarcinoma or squamous cell carcinoma. As there is evidence of perforation of the left external ear canal, surgical management via total ear canal ablation is indicated.



PATIENT

Steven Hernandez

SPECIES

Canine

BREED

Boston Terrier

SEX

Intact Male

AGE

8Y

WEIGHT

21lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

HVSFA

HOSPITAL NAME

Hospital Veterinario
San Francisco de Asis

REFERRING VET

Meaux

INVOICE

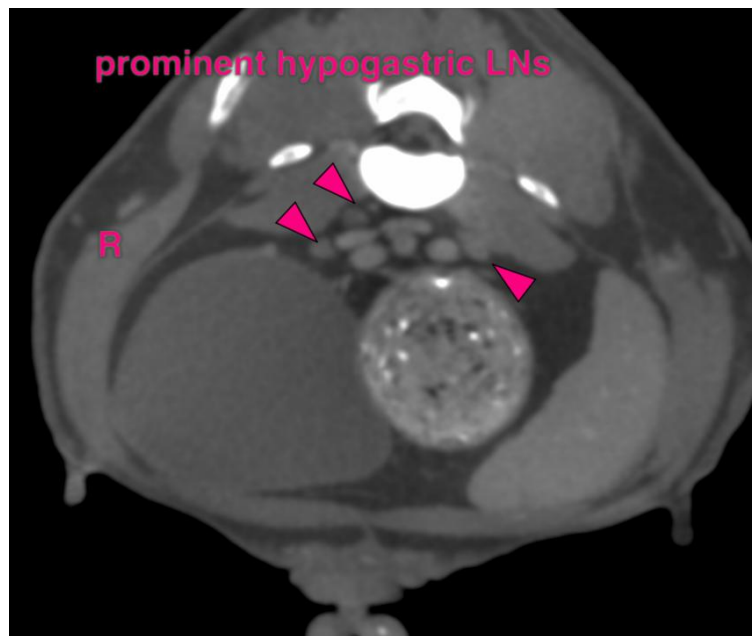
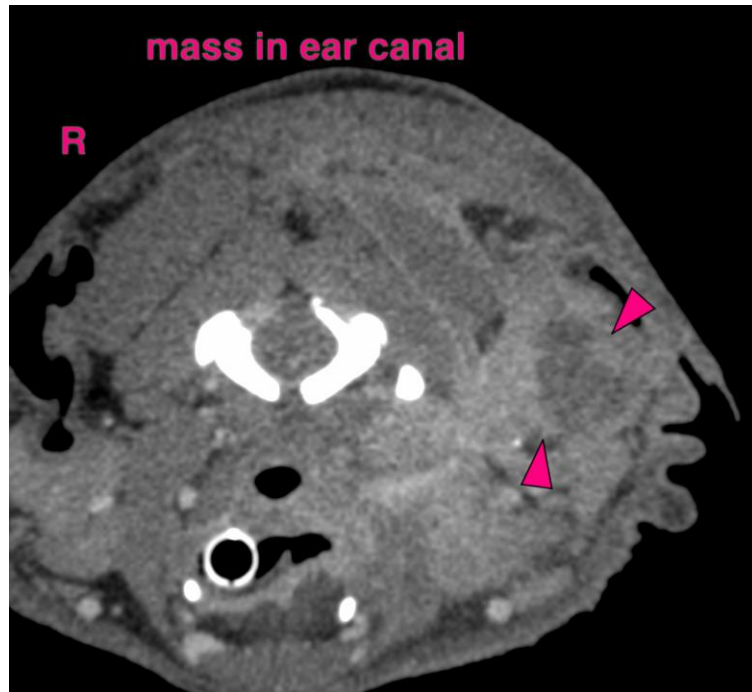
73260

DATE

1-8-26

The enlarged hypogastric lymph nodes and renal lymph nodes can be a sequela to the prostatic changes – rule out possible accompanying prostatitis or metastatic spread of the right testicular soft tissue neoplasia (e.g. Leydig cell tumor, Sertoli cell tumor).

The enlarged pulmonary arteries can be indicative for heartworm infection. Testing for potential infection following the guidelines of the “American Heartworm Society” <https://www.heartwormsociety.org> may be beneficial.





PATIENT

Steven Hernandez

SPECIES

Canine

BREED

Boston Terrier

SEX

Intact Male

AGE

8Y

WEIGHT

21lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

HVSFA

HOSPITAL NAME

Hospital Veterinario
San Francisco de Asis

REFERRING VET

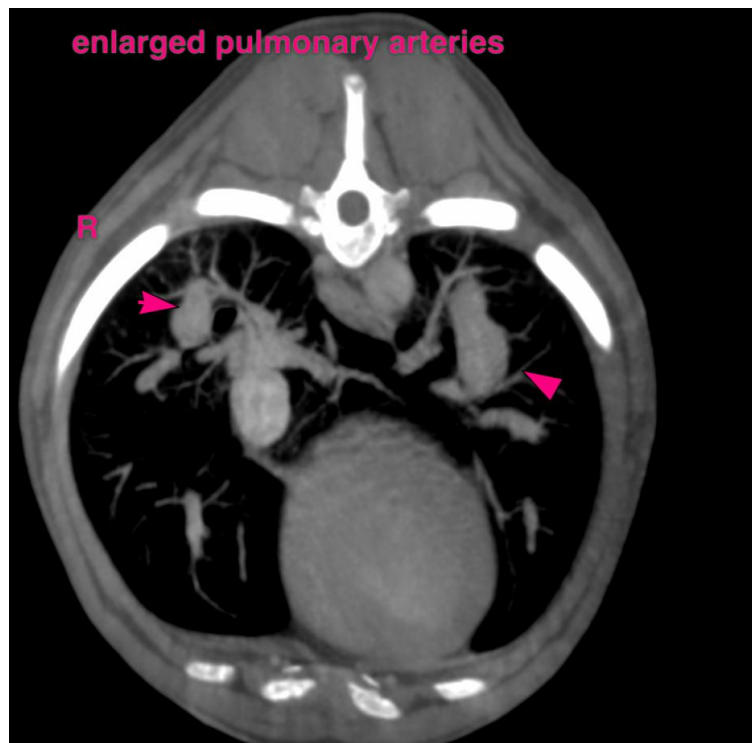
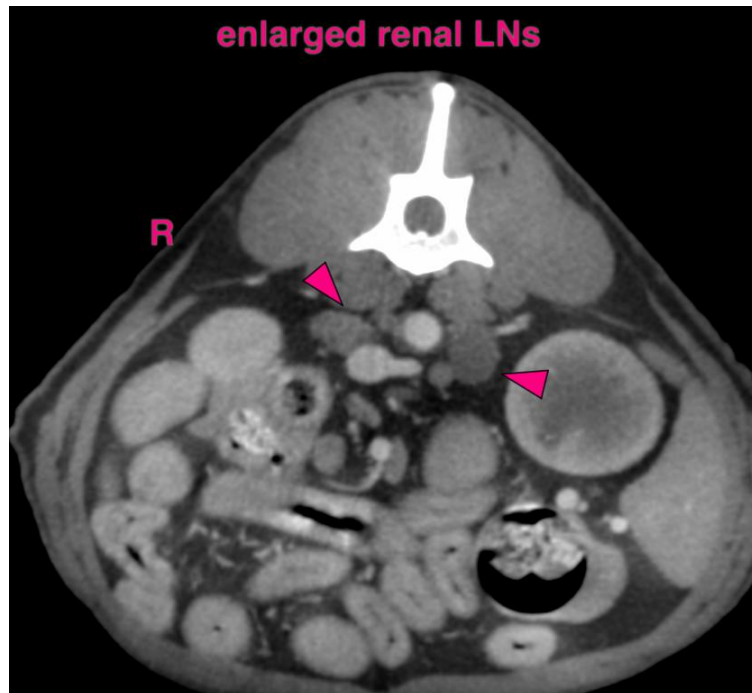
Meaux

INVOICE

73260

DATE

1-8-26





PATIENT

Steven Hernandez

SPECIES

Canine

BREED

Boston Terrier

SEX

Intact Male

AGE

8Y

WEIGHT

21lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

HVSFA

HOSPITAL NAME

Hospital Veterinario
San Francisco de Asis

REFERRING VET

Meaux

INVOICE

73260

DATE

1-8-26

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