



PATIENT

Paggy Sue Oliver

PRESENTING CLINICAL SIGNS

Nasal discharge since June/July, not improving on antibiotics, yellow discharge, no trouble breathing, sending sample to lab for c/s

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL

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

BREED

Pug

COMPUTED TOMOGRAPHIC FINDINGS

Multiple teeth are absent.

There is a cleft between the left & right horizontal plate of the palatine bone – covered by gingiva.

SEX

Spayed Female

In the left nasal cavity, a moderate amount of fluid attenuating material is attached to the nasal mucosal lining. Moderate destruction of the left nasal conchal & turbinate structures is appreciate. Level with the caudal opening of the left ventral nasal meatus into the choana, a mild hyperattenuating (95HU) polypoid lesion is protruding from the floor of the choanal into the lumen of the choana.

AGE

1 Year, 6 Month

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The lateral ventricles and the third ventricle are significantly dilated, and the third ventricle presents a large caudal outpouching protruding dorsally of the quadrigeminal plate and extending dorsally over the cerebellum. The volume of the cerebellum is significantly decreased. The mesencephalic aqueduct appears narrowed.

HOSPITAL NAME

Adelaide Plains
Veterinary Surgery

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.

COMPUTED TOMOGRAPHIC DIAGNOSIS

REFERRING VET

John Katakasi

- Suspect polypoid lesion caudal choanal opening left ventral nasal meatus
- Left sided destructive rhinitis
- Hydrocephalus internus with large supracollicular fluid accumulation and mass effect in the cerebellum
- Possible stenosis of the aquaeductus mesencephali
- Multiple absent teeth
- Occult submucosal cleft palate

INVOICE

54600

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

10-12-22

There is a polypoid lesion (e.g. inflammatory polyp, chondroma, granuloma) on the floor in the left aspect of the choanal, partially obliterating the left nasal passage – a potential cause for the left sided destructive rhinitis. A potential would be a coincidental mucus plug at this level – but the attenuating pattern is unusual. Recommend rhinoscopy/retrograde evaluation of the nasopharynx to confirm the diagnosis and perform excisional biopsy if possible.



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The hydrocephalus can be a sequela to stenosis of the mesencephalic aqueduct. The supracollicular fluid accumulation results in a significant mass effect on the cerebellum – Dandy - Walker like malformation of the cerebellum is a differential. If neurological clinical signs develop, workup can be complemented by an MRI study of the brain.

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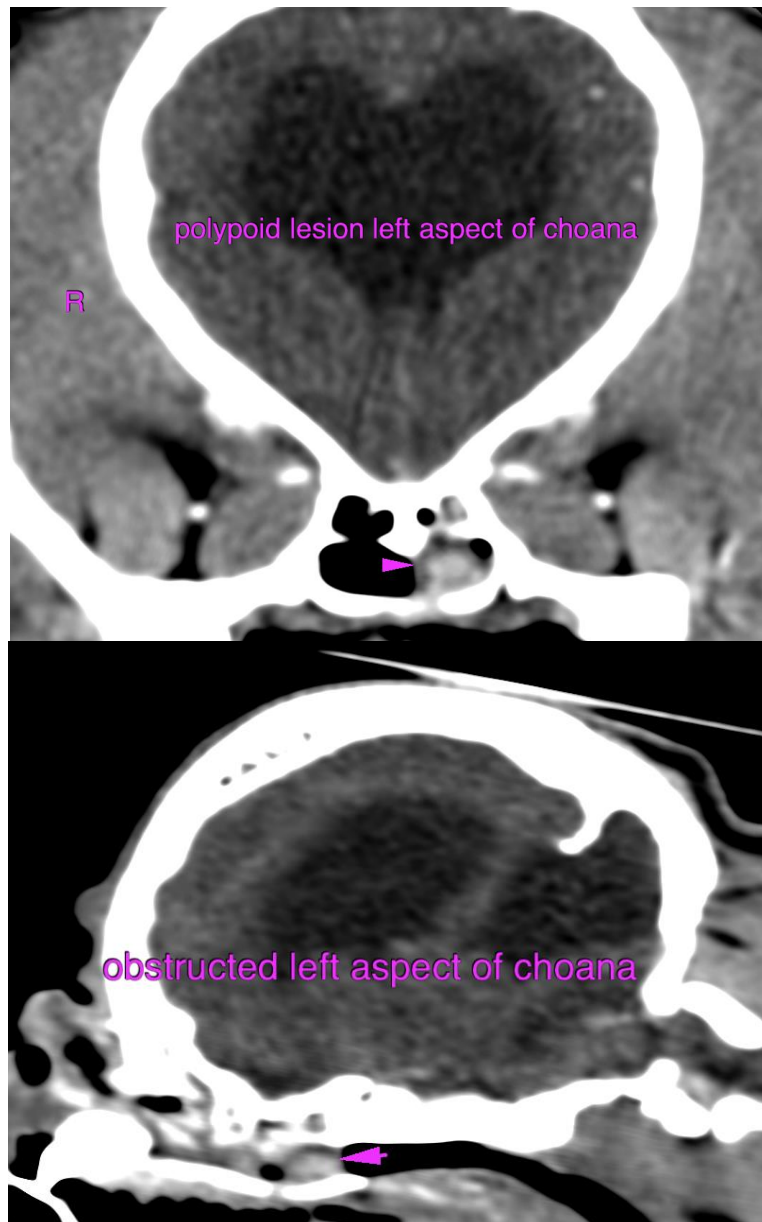
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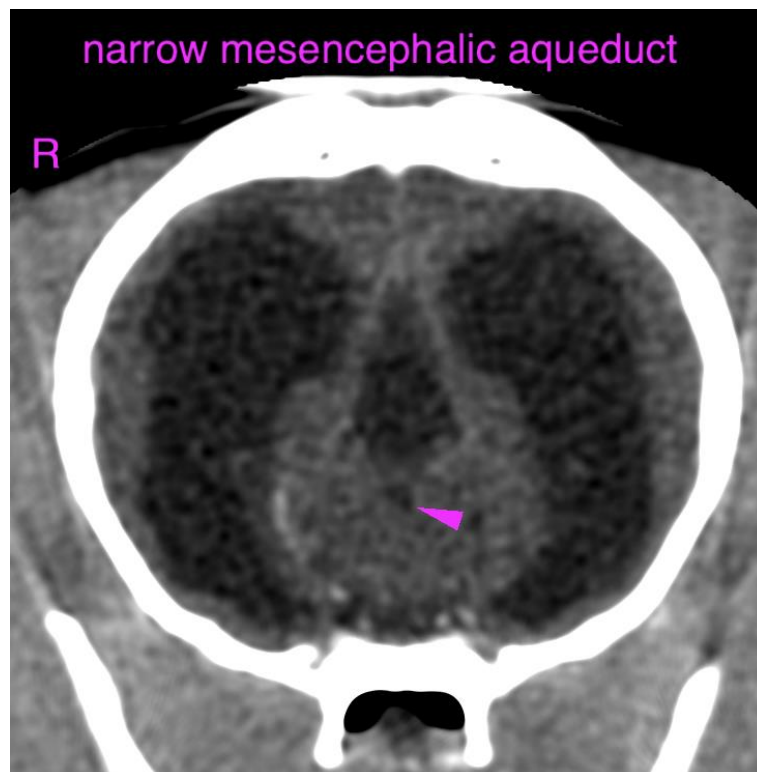
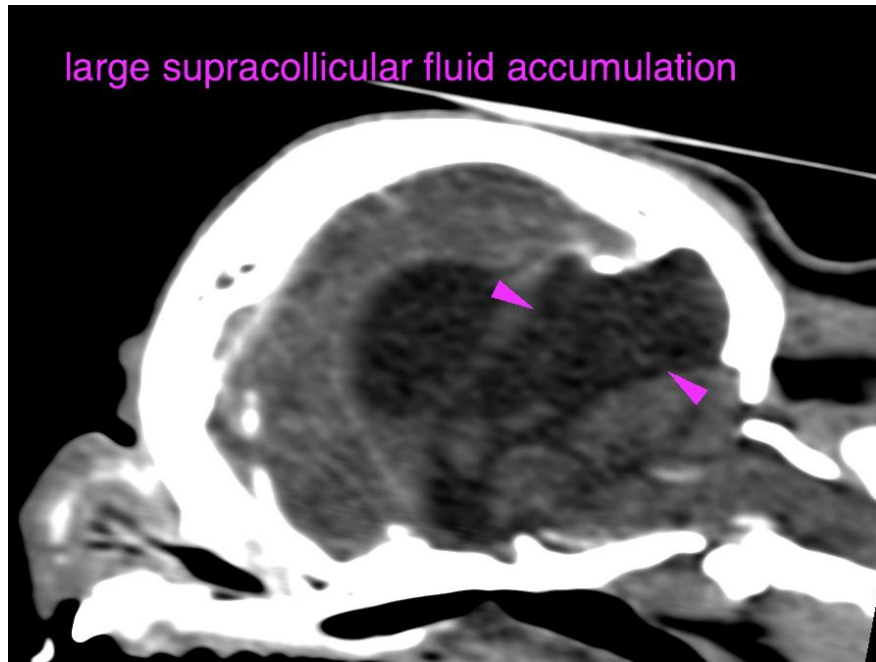
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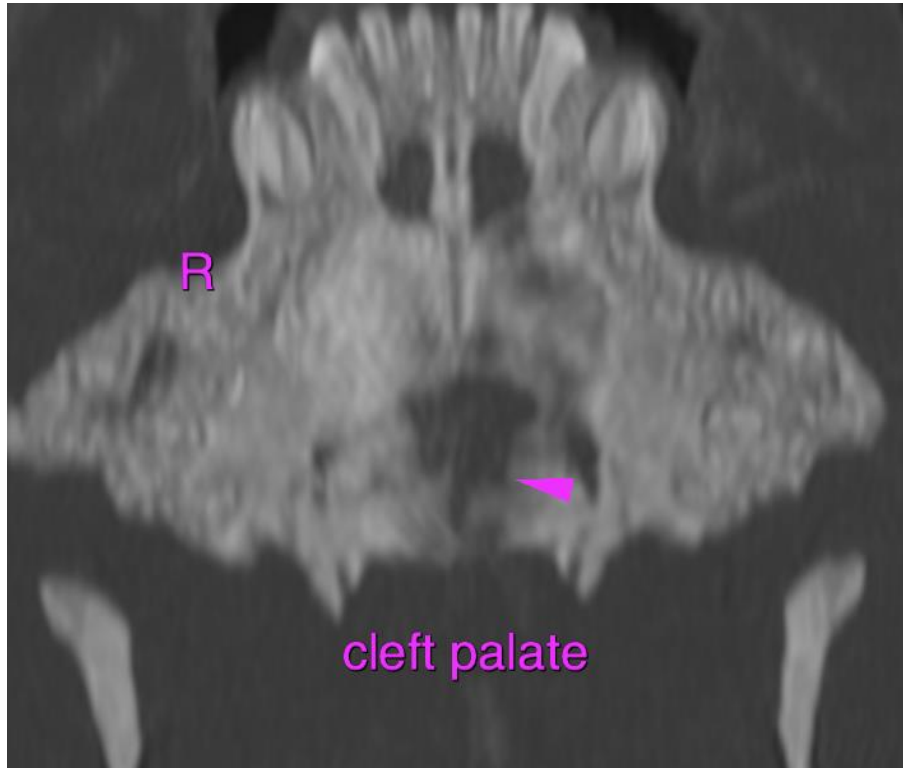
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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