



**PATIENT PRESENTING CLINICAL SIGNS**

Archer Jeudy Oral mass noted by owner about 10 days ago. On oral exam a 1.2cm pigmented mass was noted on midline rostral mandible. Cytology consistent with an oral melanoma. Hx of multiple cutaneous mast cell tumors (5 high grade and 1 low grade tumor) on the right foot -- HN1 right popliteal lymph node metastasis -- right pelvic amputation on 7/23/21 and completed vinblastine chemotherapy protocol from 8/4/2021 to 10/13/21.

**SPECIES**

Canine Abnormal PE/Chem/CBC/UA Results: Oral cavity: 1.2 cm black mass midline rostral mandible Abdominal ultrasound 10/13/21: 1. Moderate gallbladder sludge, consistent with previous examination, likely individual normal variation 2. Heterogenous and moderately enlarged prostate, increased in size from previous examination, rule out prostatic adenocarcinoma, transitional cell carcinoma, prostatic hyperplasia

**BREED**

Burmese Mountain Dog

**COMPUTED TOMOGRAPHY OF THE SKULL & THORAX**

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

**SEX**

MN

**COMPUTED TOMOGRAPHIC FINDINGS**

Skull

**AGE**

7 Years

The pictured parts of the dentition are complete and unremarkable in all jaw quadrants. At the lingual aspect of the rostral aspect of the right body of the mandible – level with 101-103 – a broad based moderate contrast enhancing gingival mass measuring 8 x 10 x 6 mm in size is visible. The underlying bone at the same level presents no abnormalities.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

**HOSPITAL NAME**

Animal Health Partners

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.

**REFERRING VET**

Dr. Jerome Gagnon  
DACVIM (Oncology)

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 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.

**INVOICE**

47863

The left aspect of the ventral arch and the mid aspect of the dorsal arch of C1 are incompletely ossified with smooth osseous new bone formations in the left lateral aspect level with the discontinuity of the ventral arch.

**DATE**

10-19-21

Thorax

The vertebral endplates T6/T7 present mild spondylosis formation.



**PATIENT**

Archer Jeudy

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.

**SPECIES**

Canine

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.

**BREED**

Burnese Mountain  
Dog

In the cranial aspect of the right middle lung lobe, a roundish, central gas attenuating lesion, demarcated by a thin, soft tissue attenuating capsule is visible, measuring 2.7 cm in size. The remainder of the lung parenchyma present the expected architecture and attenuation behavior.

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

**SEX**

MN

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Gingival mass, midline rostral part right mandible
- Bulla right middle lung lobe
- Incidental incomplete ossification C1
- Spondylosis deformans T6/T7
- No evidence of pulmonary metastatic disease

**AGE**

7 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The small gingival mass is fitting the history of melanoma. There is no evidence of osseous involvement and the regional lymph nodes are normal. Anyway, consider complementing FNA sampling of the tributary lymph nodes for full tumor staging.

**HOSPITAL NAME**

Animal Health  
Partners

**REFERRING VET**

Dr. Jerome Gagnon  
DACVIM (Oncology)

**INVOICE**

47863

**DATE**

10-19-21



**PATIENT**

Archer Judy

**SPECIES**

Canine

**BREED**

Burnese Mountain  
Dog

**SEX**

MN

**AGE**

7 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Animal Health  
Partners

**REFERRING VET**

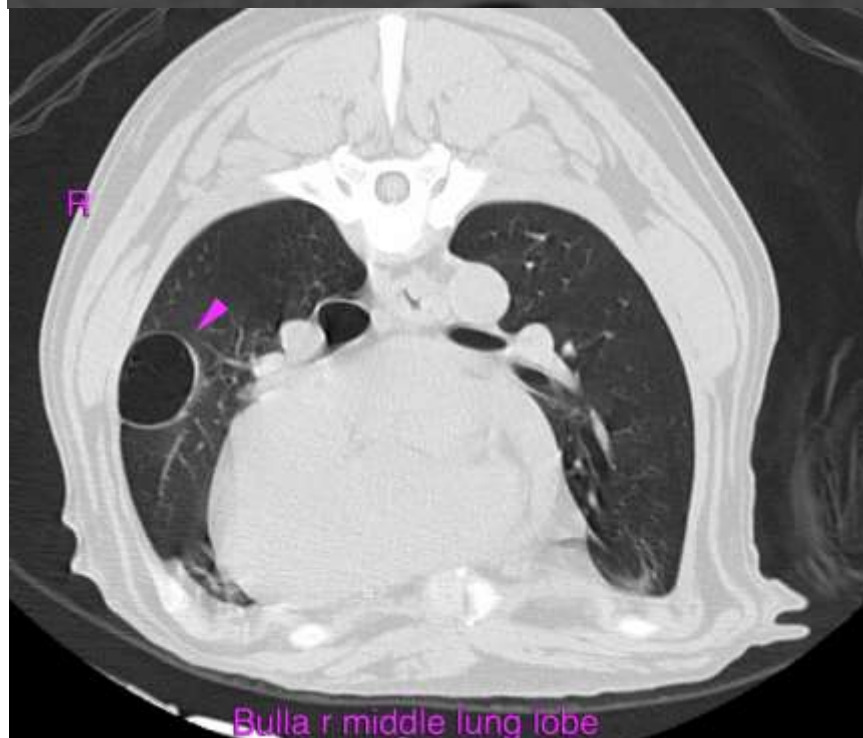
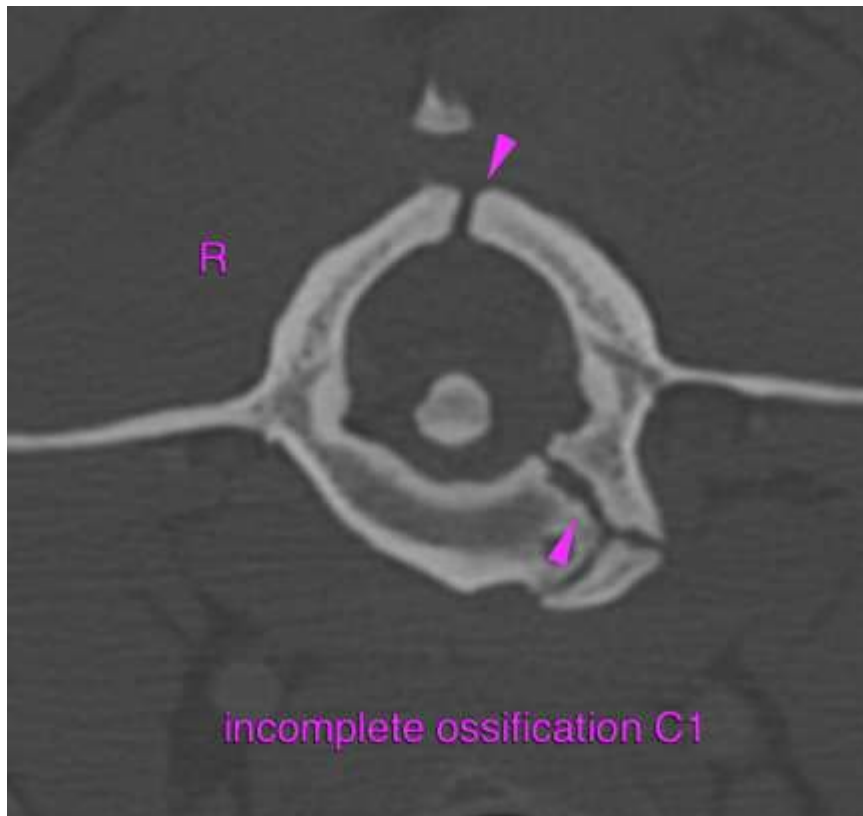
Dr. Jerome Gagnon  
DACVIM (Oncology)

**INVOICE**

47863

**DATE**

10-19-21





**PATIENT**

Archer Jeudy

**SPECIES**

Canine

**BREED**

Burnese Mountain  
Dog

**SEX**

MN

**AGE**

7 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Animal Health  
Partners

**REFERRING VET**

Dr. Jerome Gagnon  
DACVIM (Oncology)

**INVOICE**

47863

**DATE**

10-19-21



The information and recommendations provided are based on the images presented by the referring veterinarian. 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  
sebast.schaub@gmail.com