



PATIENT PRESENTING CLINICAL SIGNS

Dylan Rodd History: Hx of oral mass caudal mandible, had Sx and radiation. Melanoma vaccine. Tumor is back, dentist appointment tomorrow for options.

SPECIES Abnormal PE/Chem/CBC/UA Results: halitosis, oral mass caudal right mandible

Canine **COMPUTED TOMOGRAPHIC STUDY OF THE SKULL & THORAX**

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

Rhodesian Ridgeback **COMPUTED TOMOGRAPHIC FINDINGS**

SEX Skull

Neutered Male The tooth elements 401-405 and 410-411 are absent. Centered on the caudal aspect of the body of the right mandible, a uniform soft tissue attenuating and heterogeneous contrast enhancing mass is visible, presenting a mild cauliflower like appearance and following the contour of the diaphragm. The caudal right body of the mandible presents extensive permeative osteolytic lesions extending rostral up to the level of triadan 407 and distally including the ventral segment of the ramus of the right mandible.

AGE

8 Years

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

INTERPRETED BY

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

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

HOSPITAL NAME

Mobile Pet Imaging
CFL

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

Meaux

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.

Thorax

INVOICE The vertebral endplates of the caudal thoracic spine present mild spondylosis formation.

13916

DATE

10/20/21



PATIENT Dylan Rodd
 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 Rhodesian Ridgeback
 The lung parenchyma presents the expected architecture and attenuation behavior with interspersed punctuate mineralization and mild compression atelectasis of the caudodorsal dependent aspects of the lung.

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

- AGE** 8 Years
- Monostotic aggressive osteolytic lesion right body of mandible with an associated soft tissue mass
 - Mild lymphadenopathy right mandibular and medial retropharyngeal lymph node
 - Pulmonary osteomas
 - Mild spondylosis formation caudal thoracic spine
 - No evidence of pulmonary metastatic disease

INTERPRETED BY

Sebastian Schaub,
 DVM Dr. med. vet.
 DipECVDI

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings fit the history of an oral mass – melanoma – associated with the caudal segment of the right mandible. Complete surgical excision of the mass by the means of total hemimandibulectomy appears as a feasible treatment option.

HOSPITAL NAME

Mobile Pet Imaging
 CFL

Consider complementing complete tumor staging by FNA sampling of the tributary lymph nodes.

REFERRING VET

Meaux

INVOICE

13916

DATE

10/20/21



PATIENT

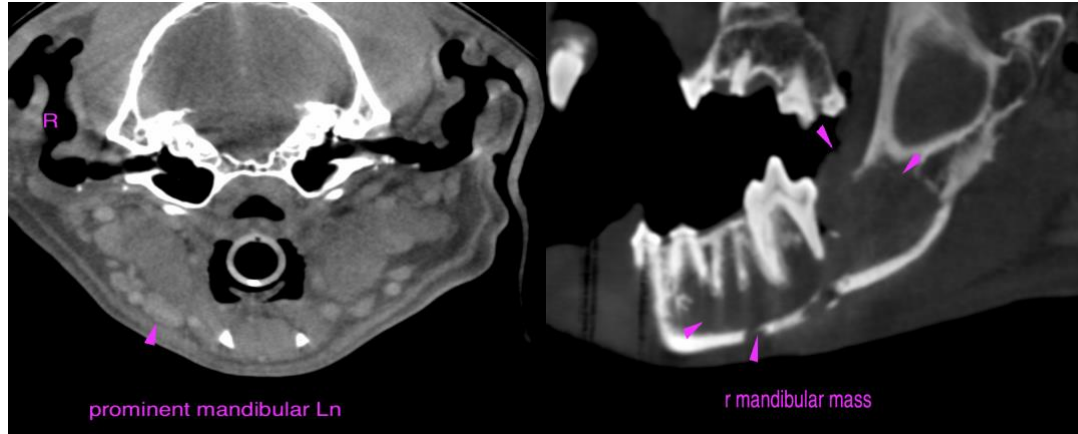
Dylan Rodd

SPECIES

Canine

BREED

Rhodesian Ridgeback



SEX

Neutered Male

AGE

8 Years

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

INTERPRETED BY

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

HOSPITAL NAME

Mobile Pet Imaging
CFL

REFERRING VET

Meaux

INVOICE

13916

DATE

10/20/21