

**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Smooshy Perez  
**PRESENTING CLINICAL SIGNS** Smooshy presented for evaluation on 10/5/2022 of weight loss. Previously she had a tumor removal at another veterinary clinic. CBC- was wnl, Chem renal azotemia and severe increased calcium. Radiographs revealed no evidence of tumor, neither metastasis in the lungs. A sample was sent for PTH and iCa and both came back elevated confirming Primary HyperParathyroidism. Referral for CT Scan of the parathyroid hormones in order to diagnose possible adenoma and prepare for surgery. Bloodwork and radiographs attached.

**SPECIES**

Canine

**BREED**

Boxer

Abnormal PE/Chem/CBC/UA Results: CBC --- unremarkable CHEM --- CREA mild increased 1.8mg/dL CA >16.0mg/dL PTH --- 25.20(HIGH) Test Requested: -Ionized Calcium --- 1.97(HIGH) CALCIUM --- 15.7(HIGH)

**COMPUTED TOMOGRAPHIC STUDY OF THE NECK**

**SEX**

A high resolution pre- and post-contrast CT study of the neck is provided for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

Spayed Female

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

**AGE**

8 Years

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 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.

Along the dorsal lamina of C1, solid smooth periosteal new bone formation is appreciated.

**HOSPITAL NAME**

Veterinary Image  
 Center

Multifocal ventral spondylosis formation is seen along the cervical spine. The intervertebral discs C5/C6 and C6/C7 are mildly bulging into the vertebral canal, distorting the ventral epidural space at the same level.

At the cranial pole of the right thyroid gland a uniform soft tissue attenuating and mild heterogeneous contrast enhancing nodule, measuring 5.4 mm in diameter is appreciated. Throughout the parenchyma of both thyroid glands, small (<3 mm) parenchymal filling defects are appreciated.

**REFERRING VET**

Dr. R Torres

In the subcutaneous tissue at the left craniodorsal aspect of the neck, level with C1, a uniform soft tissue attenuating and heterogeneous contrast enhancing nodule, measuring 10 mm in diameter is appreciated.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**INVOICE**

42415

- Left thyroid nodular lesion - likely originating from the caudal parathyroid gland
- Subcutaneous cystic non-specific nodule left craniodorsal aspect of the neck
- Mild intervertebral disc protrusion C5/C6 and C6/C7 without compressive myelopathy
- Spondylosis deformans

**DATE**

10/26/22



**PATIENT INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**PATIENT** Smooshy Perez  
**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS** The nodular lesion in the left thyroid gland in combination with the history of hypercalcemia is compatible with functional parathyroid adenoma or less likely carcinoma. Either surgical management or ultrasound guided alcohol ablation are potential treatment options.

**SPECIES** The thyroid cysts are considered as an incidental finding.

**CANINE** Canine

**BREED**

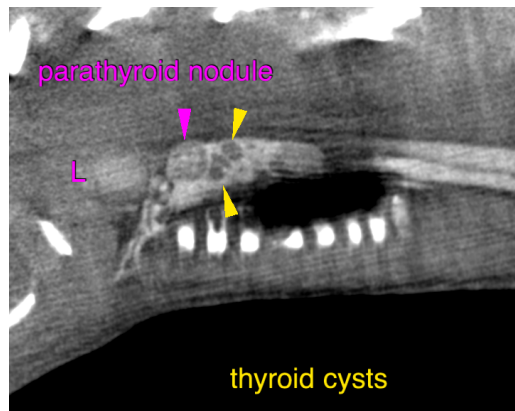
Boxer

**SEX**

Spayed Female

**AGE**

8 Years



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DVM Dr. med. vet.  
DipECVDI

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.

**HOSPITAL NAME**

Veterinary Image  
Center

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