



PATIENT PRESENTING CLINICAL SIGNS

Mia Lugo Vestibular signs, anisocoria (dilated OS). Rule out brain Dz vs. other.

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

SPECIES 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.

Canine

COMPUTED TOMOGRAPHIC FINDINGS

BREED Skull

Multiple teeth are absent.

Chihuahua

Multifocal incomplete ossification of the sutures of the skull is noted.

SEX

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

Female Spayed

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

AGE

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.

12 Years

In the region of the interventricular foramen of the right lateral ventricle, a roundish mild to moderate contrast enhancing mass is noted, measuring 10 mm in diameter. A midline shift of the right lateral ventricle to the left is appreciated.

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.

Thorax

HOSPITAL NAME

The bony and surrounding soft tissue structures are within normal limits.

Mobile Pet Imaging

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.

REFERRING VET

Meaux

The cardiovascular structures including the pulmonary vasculature are within normal limits.

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.

INVOICE

54478

The lung parenchyma presents the expected architecture and attenuation behavior, but a small region of subpleural consolidation of the lung parenchyma in the lateral aspect of the left caudal lung lobe.

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

DATE

10-5-22

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Intracranial likely extraaxial mass rostral aspect right lateral ventricle
- Multiple absent teeth



PATIENT • Small region of subpleural pulmonary consolidation left caudal lung lobe

Mia Lugo

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

There is a mass in the rostral aspect of the right lateral ventricle that I would consider to be extraaxial and the top differential in this region is choroid plexus tumor, ependymoma or granuloma. A MRI study of the brain can be used for further differentiation. Consider complementing workup by a CSF tap.

Canine

Based on the results of the advanced diagnostic tests, the chances of radiation therapy might be discussed with oncologist.

BREED

The consolidated subpleural lesion of the left caudal lung lobe is most consistent with atelectasis or zone with pneumonia. The odds for neoplastic disease are low.

Chihuahua

SEX

Female Spayed

AGE

12 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

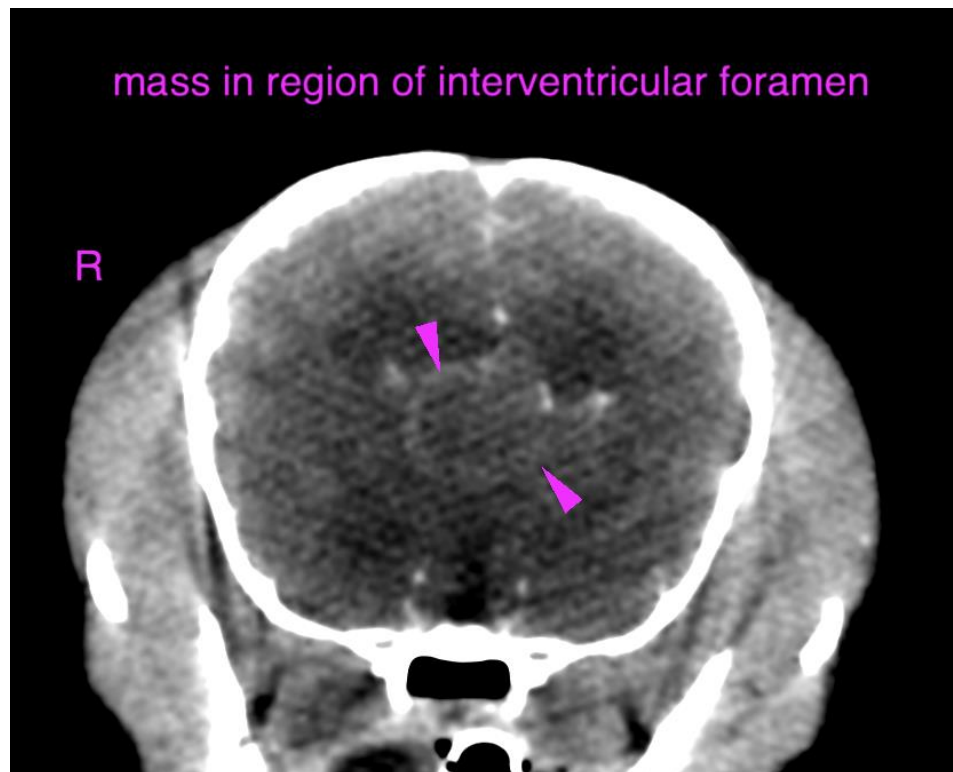
Meaux

INVOICE

54478

DATE

10-5-22





PATIENT

Mia Lugo

SPECIES

Canine

BREED

Chihuahua

SEX

Female Spayed

AGE

12 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

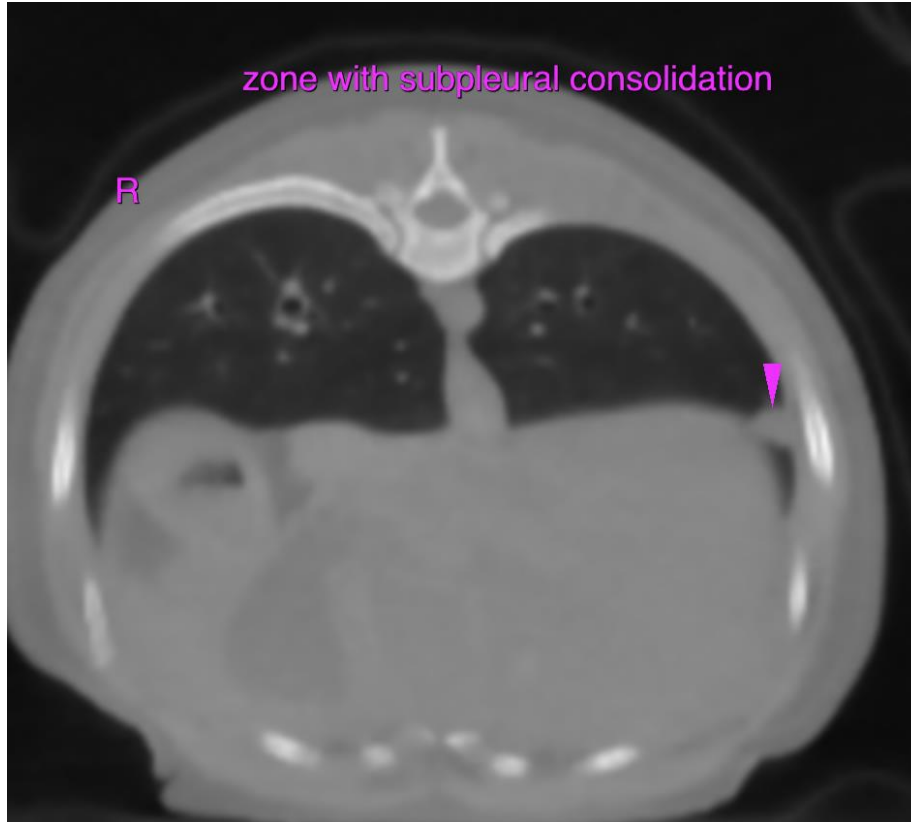
Meaux

INVOICE

54478

DATE

10-5-22



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
sebast.schaub@gmail.com