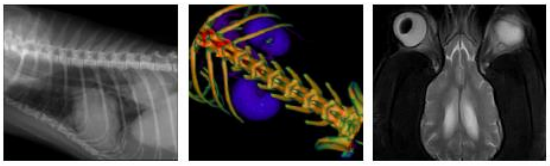


SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Cooper Mohip

SPECIES

Canine

BREED

Shih Tzu

SEX

MN

AGE

5 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Animal Health Partners

REFERRING VET

Dr. Ashley Gold

INVOICE

54954

DATE

11-2-22

PRESENTING CLINICAL SIGNS

Stertor and nasal congestion with hacking cough for the past 4 weeks. No improvement with week long courses of doxycycline and clavaseptin. On retroflex nasopharyngoscopy the nasopharnx had a septum in the middle as well as proliferative but smooth tissue on both lateral sides of the nasopharynx. Intermittent left forelimb lameness - should issue.

Abnormal PE/Chem/CBC/UA Results: Intermittent reverse sneezing, cough easily elicited on palpation of trachea - honking cough with terminal hack of white foam.

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

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

COMPUTED TOMOGRAPHIC FINDINGS

Skull

Triadan 104, 204, 305, 311, 405 and 411 are absent. Moderate rotation of the maxillary premolar teeth bilaterally is noted. A persistent triadan 605 is appreciated. There is evidence of generalized mild periodontal disease in all jaw quadrants.

A moderate amount of soft tissue material is attached to the nasal mucosal lining. MIld to moderate atrophy of the nasal conchal & turbinate structures is appreciated.

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

Both tympanic bullae are filled with non-contrast enhancing soft tissue material. The osseous lining of the tympanic bullae is mild to moderately thickened and smooth. The external ear canals are within normal limits.

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.

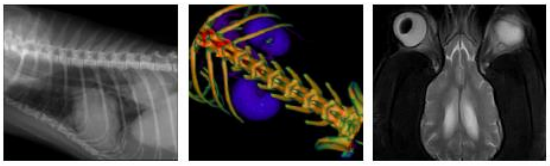
The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

Thorax

The periarticular bones of the left shoulder joint present moderate osteophyte new bone formation. Advanced exostosis formation is seen in the bicipital groove of the left humerus. The right shoulder joint presents smooth osseous margins. No abnormalities of the soft tissue structures surrounding the shoulder joints are appreciated. The region of the brachial plexus bilaterally is unremarkable.

The elbow joints present without abnormalities.

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.



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

The left principal bronchus is collapsed. 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.

The lung parenchyma presents the expected architecture and attenuation behavior.

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Destructive rhinitis
- Otitis media
- Bronchial collapse left main stem bronchus
- Degenerative osteoarthrosis left shoulder joint and exostosis formation bicipital groove

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study is consistent with rhinitis, an underlying cause is not appreciated. Clinically a septum was appreciated level with the nasopharynx – in the CT scan only foamy soft tissue material is seen level with the caudal third of the soft palate that may masked a thin soft tissue septum. A septum can be a cause for the rhinitis. A differential is non-specific rhinitis (e.g. lymphocytic plasmocytic, eosinophilic) and the appreciated septum might be acquired due to chronic infection. There is no evidence of nasal mass or foreign material.

The collapsed left principal bronchus is considered as a sequela to the local anatomical conditions, however it might contribute to cough as well.

The otitis media can be a sequela to upper airway infection/partial obliteration.

No overt abnormalities of the lower airways are appreciated.

The left shoulder joint presents with moderate degenerative changes, an underlying cause cannot be specified in the current CT study. Complementing workup by an ultrasound examination of the left shoulder joint can be used to screen for pathology of the bicipital tendon or rotator cuff injury.

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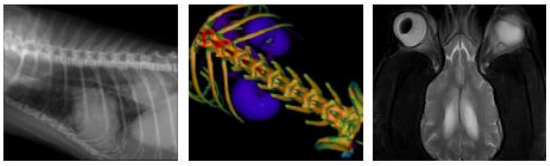

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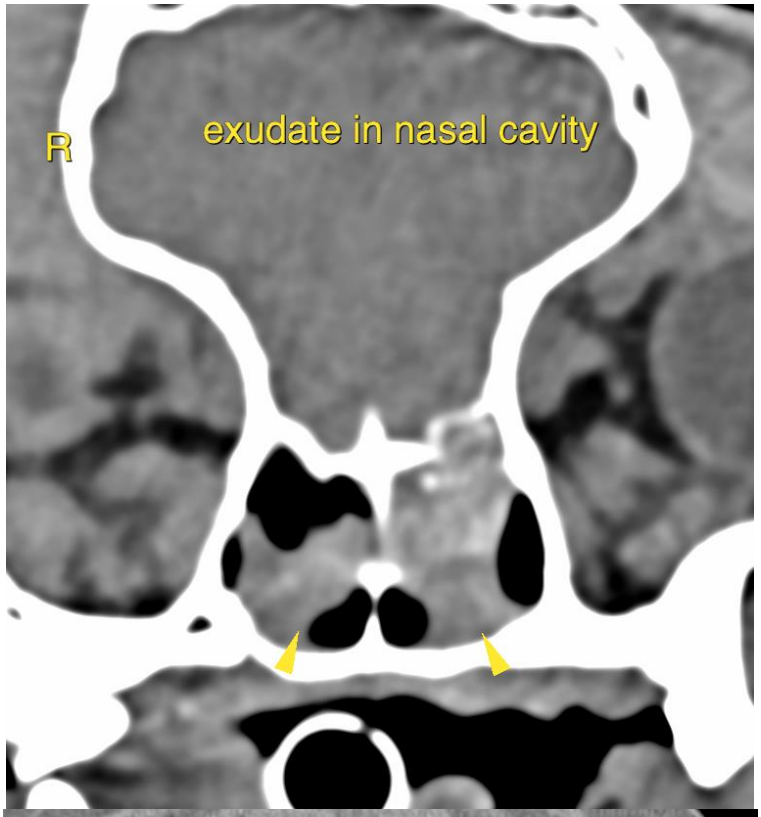

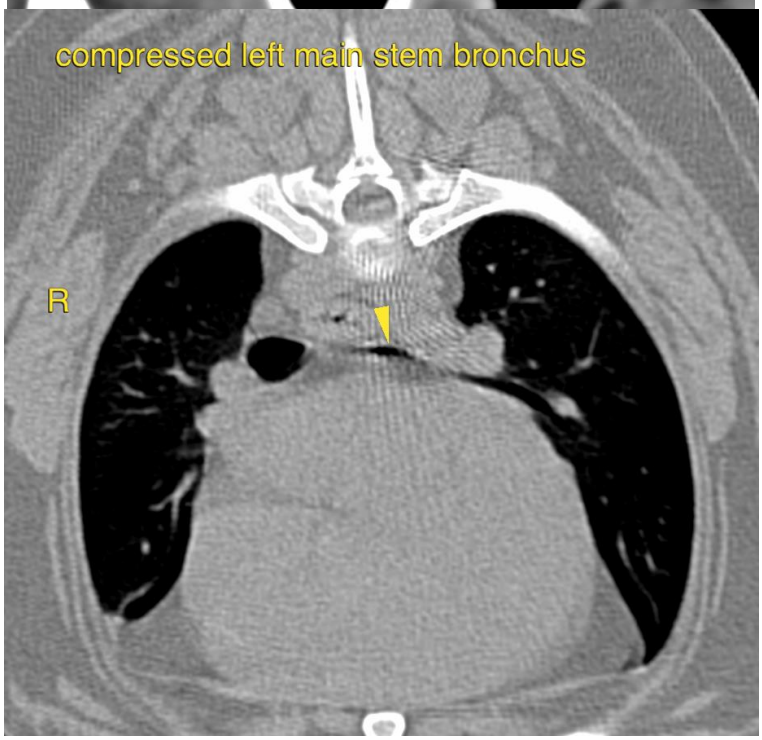

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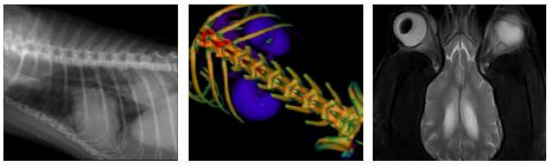

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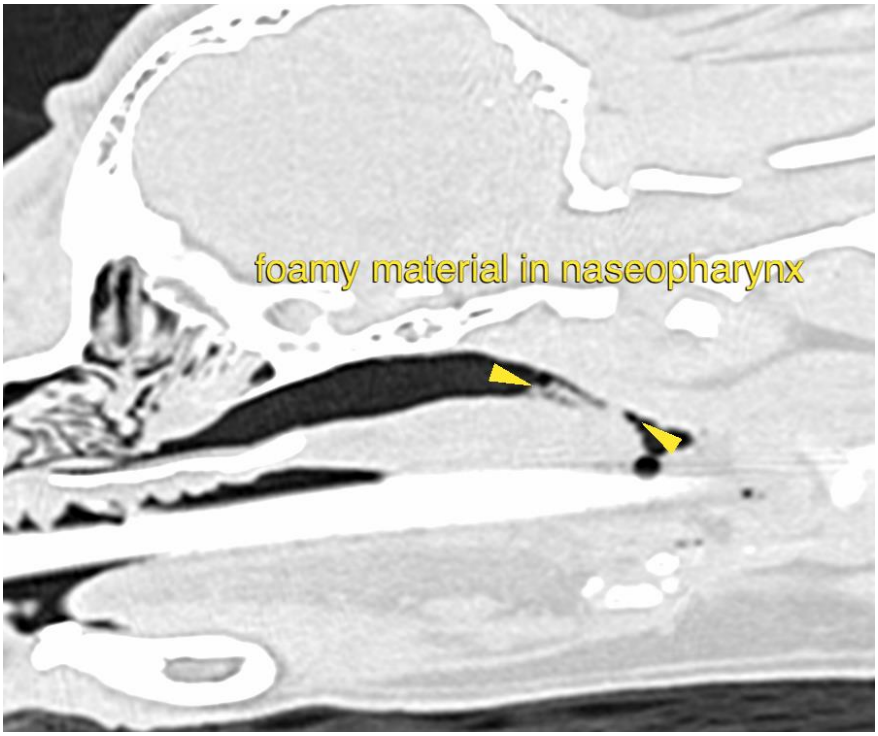

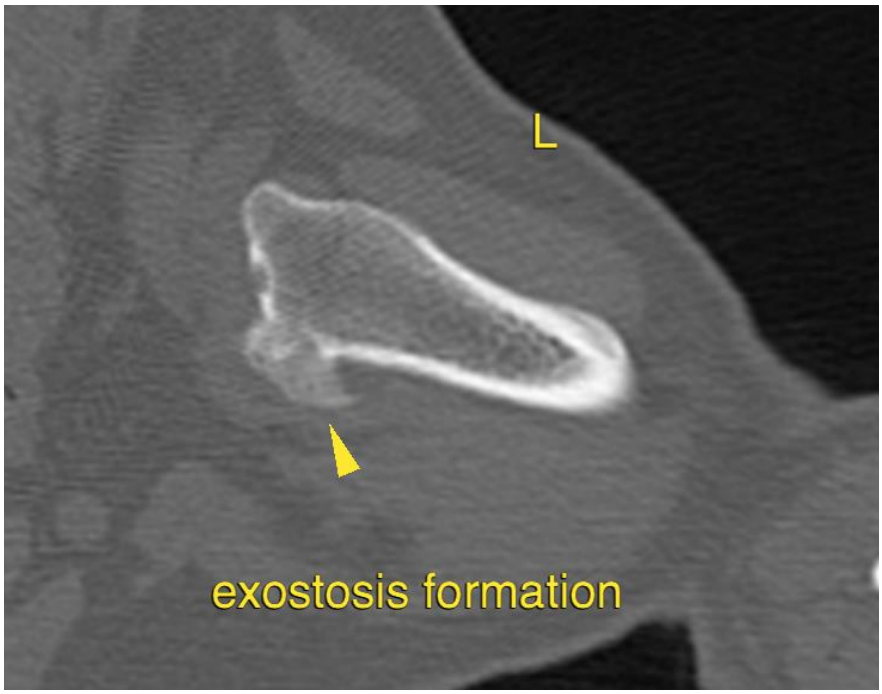

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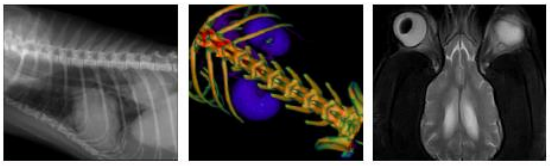

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
sebast.schaub@gmail.com