



## PATIENT

Tinkerbelle Evans

## SPECIES

Canine

## BREED

French Bulldog

## SEX

Female

## AGE

2Y

## WEIGHT

9.1kg

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet.  
DipECVDI

## IMAGING PERFORMED BY

Dayna Evans

## HOSPITAL NAME

Animal Trust -  
Ellesmere Port

## REFERRING VET

The Grange Veterinary  
Hospital

## INVOICE

73078

## DATE

12-22-25

## PRESENTING CLINICAL SIGNS

findings : on exam R submandibular swelling in region of LN remains no change here none painful feels like LN but can ? feel LN behind it, hard to appreciate salivary gland diagnosis : swelling plan / therapy : discussed biopsy with o - concern if not LN risk saliva leakage into sq and problems with that. best would be CT to dx w

## COMPUTED TOMOGRAPHY OF THE SKULL & NECK

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

## COMPUTED TOMOGRAPHIC FINDINGS

The skull has a brachycephalic conformation with significant crowding and rotation of the maxillary premolar teeth.

Triadan 311 and 411 are absent.

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

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. Soft tissue material is protruding from the external ear canals into the tympanic bulla bilaterally. The medial segment of the external ear canals is moderately narrowed.

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.

At the rostral aspect of the right mandibular salivary gland, a tortuous tubular lesion, demarcated by a prominent soft tissue attenuating and moderate contrast enhancing capsule is visible. A mineral attenuating body is appreciated in the tortuous tubular structure

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.

The intervertebral disc C4/C5 presents moderate central mineralization.

Level with the intervertebral disc space C5/C6, mineralized disc material is bulging into the vertebral canal, occupying approximately <10% of the cross-sectional area of the vertebral canal at the same level.

The remainder of the osseous and soft tissue structures of the neck are within normal limits.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Thick walled cavitary lesion blending with right mandibular salivary gland with intraluminal calculus
- Stenotic medial segment of external ear canals with epithelium protruding into the tympanic bullae
- Absent triadan 311 and 411
- Intervertebral disc herniation C6/C7 without compressive myelopathy
- Chondroid disc degeneration C4/C5



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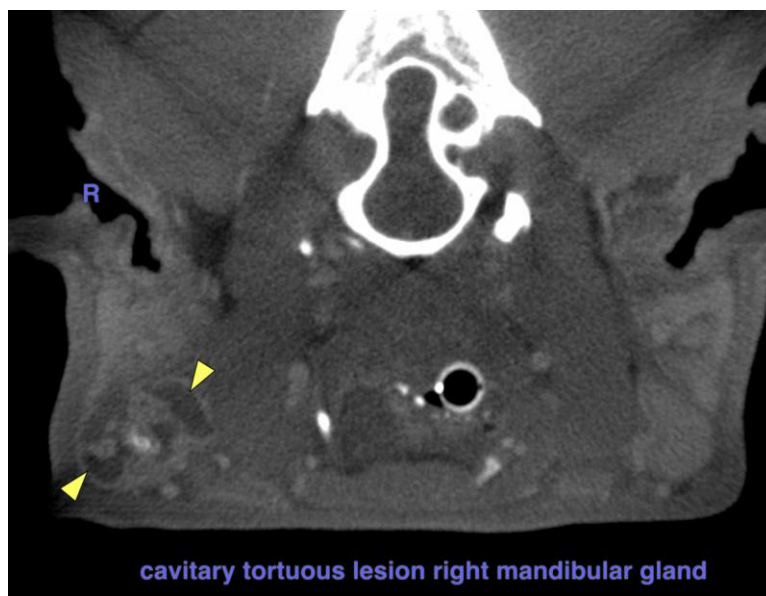
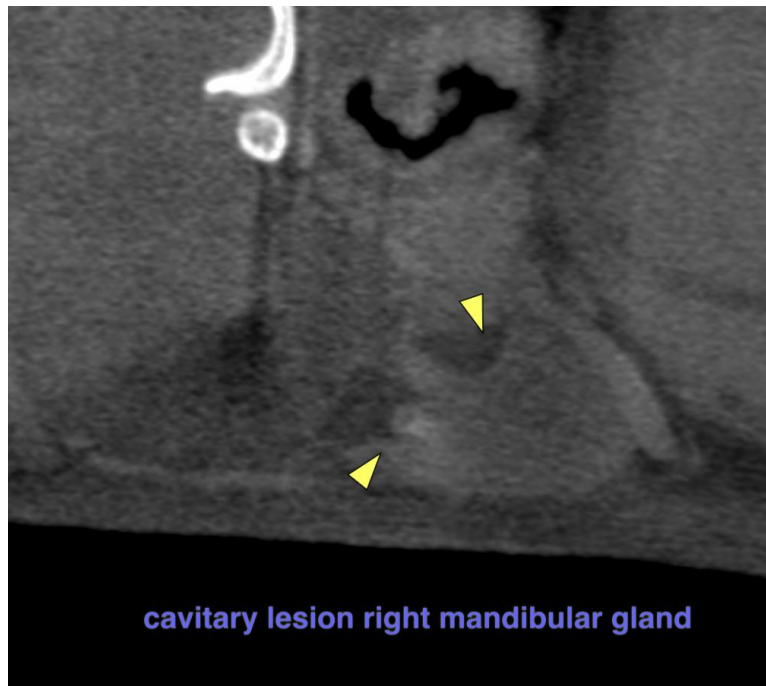
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## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The clinically appreciated right submandibular swelling is consistent with sialoceles of the right mandibular/sublingual monostomatic salivary gland along with sialolithiasis. Surgical management via sialoadenectomy of the affected salivary glands is considered as the therapy of choice.





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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  
[info@sonopath.com](mailto:info@sonopath.com)