



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Tank Marsillac  
**SPECIES** Canine  
**BREED** Great Dane Mix  
**SEX** Neutered Male  
**AGE** 7 Years

History: Presented on 2/3/2022 for inappetence (only eating ham and flat foods per owner), lethargy, diarrhea, and occasional vomiting. Physical exam unremarkable. T 104.5 F. CBC/CHEM/T4 - mild lymphopenia, eosinopenia, neutrophils towards top of normal reference range, otherwise unremarkable. Started on Clavamox and metronidazole. Re-presented on 2/7/2022 for facial swelling over nose/face - remained febrile, left lymph node subjectively enlarged compared to right, but wnl in size for breed, added carprofen. Seen at Blue Pearl 2/9/2022 due to progressive facial swelling and open diagnosis - lymphoma suspected, but Blue Pearl unable to see for consultation until next week. Swelling worsened left side enough that he cannot open his eye. BP advised to stop clavamox, continue metronidazole, added gabapentin and Cerenia.  
 Abnormal PE/Chem/CBC/UA Results:

**COMPUTED TOMOGRAPHIC SYUDY OF THE SKULL & THORAX**

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

**COMPUTED TOMOGRAPHIC FINDINGS**

**Skull**

The tooth element 305 is absent.

**INTERPRETED BY**

Sebastian Schaub,  
 DVM Dr. med. vet.  
 DipECVDI

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.

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Advanced Animal  
 Imaging

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.

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.

**REFERRING VET**

Dr. Blair Hollowell,  
 DVM

The left mandibular lymph nodes are moderately enlarged and present a heterogeneous contrast enhancement pattern. The left medial retropharyngeal lymph node is significantly enlarged, rounded, uniform soft tissue attenuating with a heterogeneous contrast enhancement pattern. Left retropharyngeal fat and subcutaneous fat along the left cranial aspect of the neck presents moderate fat-stranding.

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The right medial retropharyngeal lymph node is prominent and presents a homogeneous contrast enhancement pattern; the short-to-long-axis ratio is maintained normal <0.5.

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**PATIENT**

Tank Marsillac

The thyroid glands bilaterally are within normal limits for size, shape and organ architecture.

**Thorax**

**SPECIES**

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Multifocal spondylosis formation is seen along the thoracic spine. A mineralized body is seen in the tendon of the left supraspinatus muscle.

The left superficial cervical lymph node is prominent.

**BREED**

Great Dane Mix

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.

**SEX**

Neutered Male

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.

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7 Years

The caudodorsal dependent aspects of the lung present regions with compression atelectasis. The remainder of lung parenchyma present the expected architecture and attenuation behavior with interspersed punctuate mineralizations.

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

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Lymphadenopathy left mandibular and medial retropharyngeal lymph node
- Mild lymphadenopathy right medial retropharyngeal lymph node and left superficial cervical lymph node
- Pulmonary osteomas & regions of compression atelectasis dependent aspects of the lung
- Calcifying tendinopathy left supraspinatus muscle
- Spondylosis deformans
- No evidence of pulmonary metastatic disease

**HOSPITAL NAME**

Advanced Animal  
Imaging

**REFERRING VET**

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DVM

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The main finding is the significant enlargement of the left medial retropharyngeal lymph node and the left mandibular lymph nodes with surrounding steatitis. The findings are not specific, and potentials include both inflammatory changes – e.g. abscessation of the left medial retropharyngeal lymph node versus sterile steroid responsive lymphadenitis (commonly in young dogs and bilateral appearance)– or neoplastic transformation of the respective lymph nodes, such as round cell tumor or carcinoma (no primary neoplasm is appreciated, and the tonsil appear normal). If not done so yet,

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FNA sampling of the respective lymph nodes is warranted for further workup including sampling for culture. Advanced treatment options depend on the results of the advanced diagnostic tests.

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**SPECIES**

Canine

**BREED**

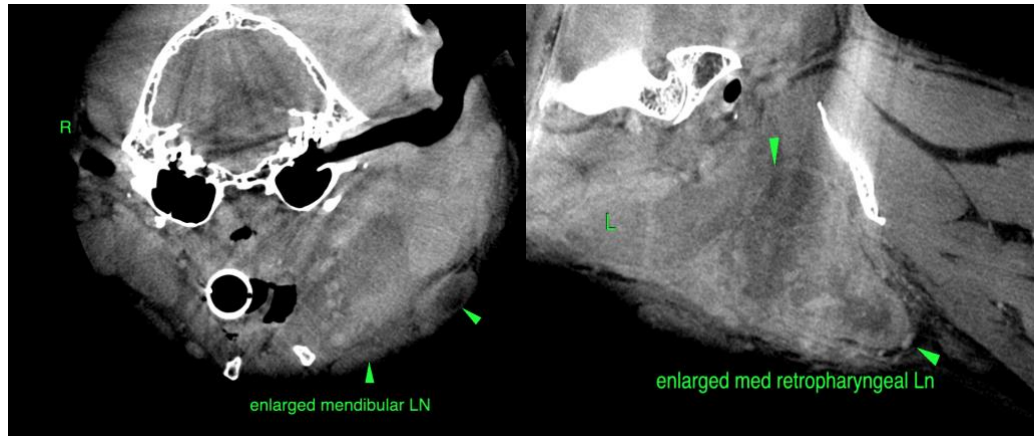
Great Dane Mix

**SEX**

Neutered Male

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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.

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
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