



PATIENT PRESENTING CLINICAL SIGNS

Jack James Presenting for treatment options for oral Squamous Cell Carcinoma of the left mandible. He presented on 11/11/2021 to his primary veterinarian due to oral pain. He was still eating and drinking but he was resistant to his face being touched. Dental cleaning helped but he continued to be painful if Debra touched the left side of his mouth. 2/2/22 - Labwork showed normal CBC counts and chemistry panel values. X-rays of the jaw revealed lytic and proliferative bony lesions of left mandible. 2/3/22 - left mandibular bone biopsy obtained. Culture was negative for bacterial growth and histopathology showed squamous cell carcinoma. He is still eating well and seems ok aside from the jaw pain. He has cataracts and does not seem well. He is not currently taking any medications.

SPECIES

Canine

BREED

Lhasa Apso

COMPUTED TOMOGRAPHY OF THE SKULL

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

SEX

MN

COMPUTED TOMOGRAPHIC FINDINGS

Triadan 105, 106, 109, 201-203, 206-208, 301-303, 305, 309, 310, 401-403, 409 and 411 are absent. The remaining teeth present evidence of moderate periodontal disease.

AGE

9 Years, 9 Months

Centered on the body of the left mandible, level with triadan 308 to 311, a heterogeneous contrast enhancing soft tissue mass is visible. The respective segment of the left mandible presents permeative osteolytic lesions.

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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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

Kim Winters

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.

INVOICE

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Monostotic aggressive osteolytic lesion left body of the mandible
- Generalized moderate periodontal disease
- Multiple absent teeth

DATE

2-16-22



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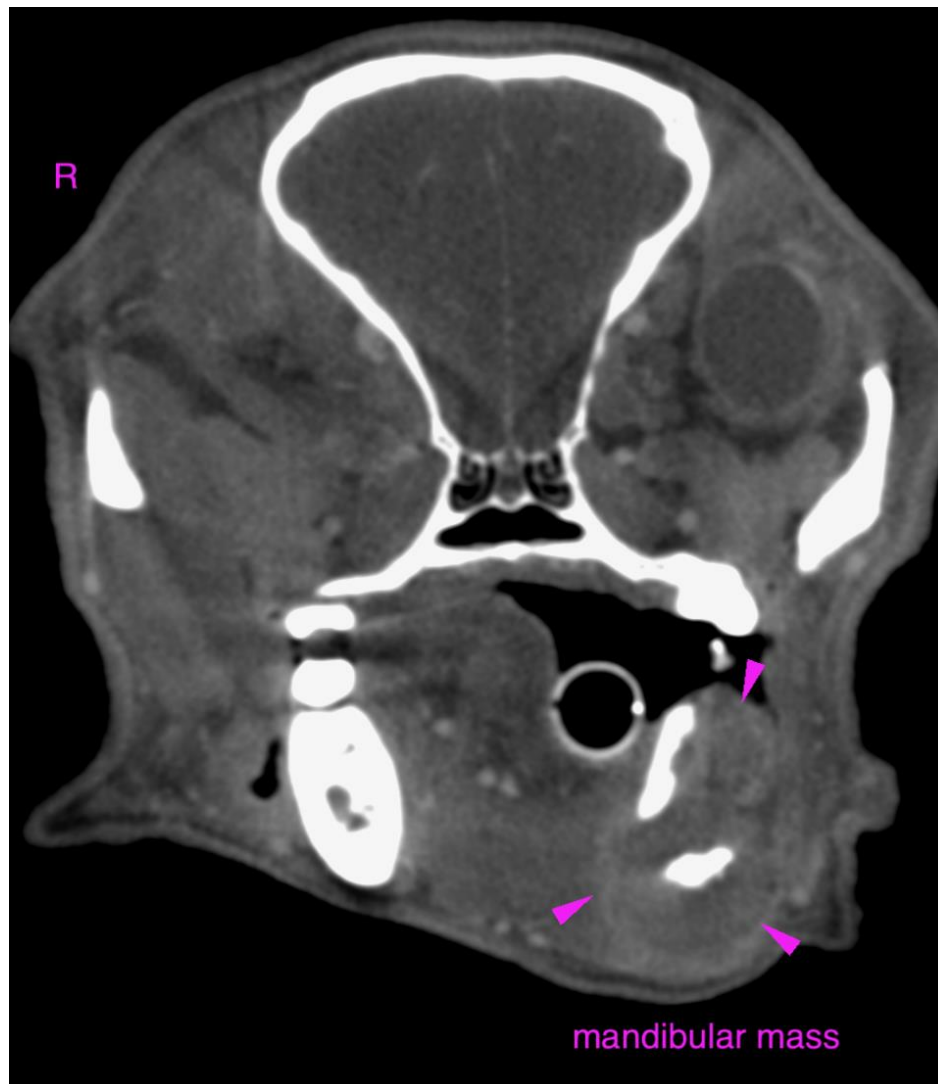
DATE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are consistent with the history of squamous cell carcinoma of the left body of the mandible. Caudal mandibulectomy is considered as a feasible treatment option with the rostral osteotomy line mesial to triadan 306.

Consider full tumor staging.





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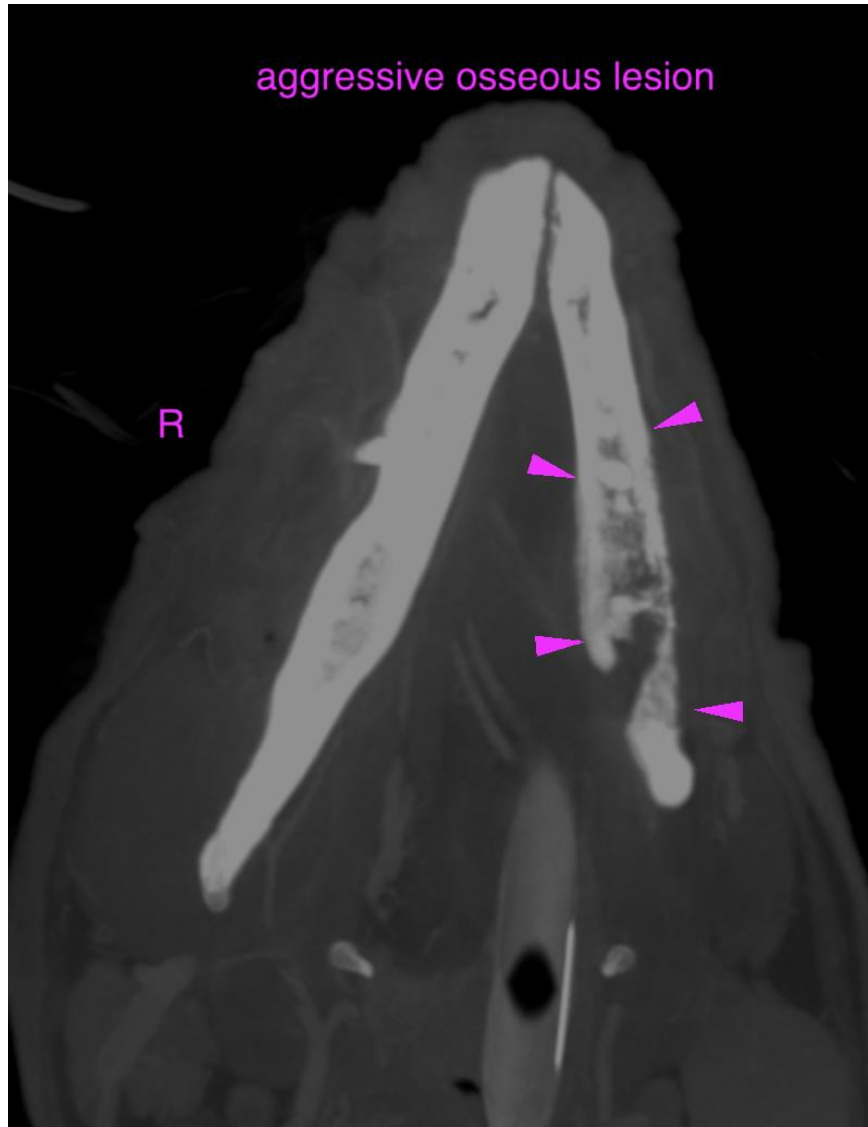
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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