



**PATIENT**

Maxie Barretta

**PRESENTING CLINICAL SIGNS**

Maxie presented for right head tilt of 3-4 week duration. Signs wax and wane. Maxie has a history of skin allergies. Maxie is not on medications.  
Abnormal PE/Chem/CBC/UA Results: normal

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY OF THE SKULL, NECK AND THORAX**

A high resolution plain CT study of the skull and e thorax are provided for review.

**BREED**

Terrier

**COMPUTED TOMOGRAPHIC FINDINGS**

Skull

Multiple teeth are absent. Triadan 209, 210 & 311 present a moderate to marked widening of the periodontal space.

**SEX**

F

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

**AGE**

6 Years

The left condylar process of the mandible presents a well-defined, crescent shaped defect of the subchondral bone in the medial aspect.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

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.

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Center

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

**REFERRING VET**

Dr. Short

The ventral aspects of the thorax are cropped by the field of view.

The vertebral body of T3 presents with a geographic well-defined lesion.

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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.

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

**DATE**

2-7-22

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 multiple regions with compression atelectasis.



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

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**COMPUTED TOMOGRAPHIC DIAGNOSIS**

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- Advanced periodontal disease 209, 210 and 311
- Multiple absent teeth
- Suspect disturbed ossification of the left mandibular condylar process (OCD like lesion)
- Suspect fatty bone marrow replacement vertebral body T3

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT study of the skull presents without a macromorphological abnormality, explaining the head tilt. There is no evidence of otitis media or interna. Be aware, that evaluation of the brain is very limited in plain CT study, and no overt abnormalities are appreciated. If there is strong suspicion for intracranial lesions, recommend complementing workup by a post contrast CT study or MRI study of the skull.

**SEX**

F

The thorax presents without clinically relevant pathology, but the compression atelectasis secondary to general anesthesia.

**AGE**

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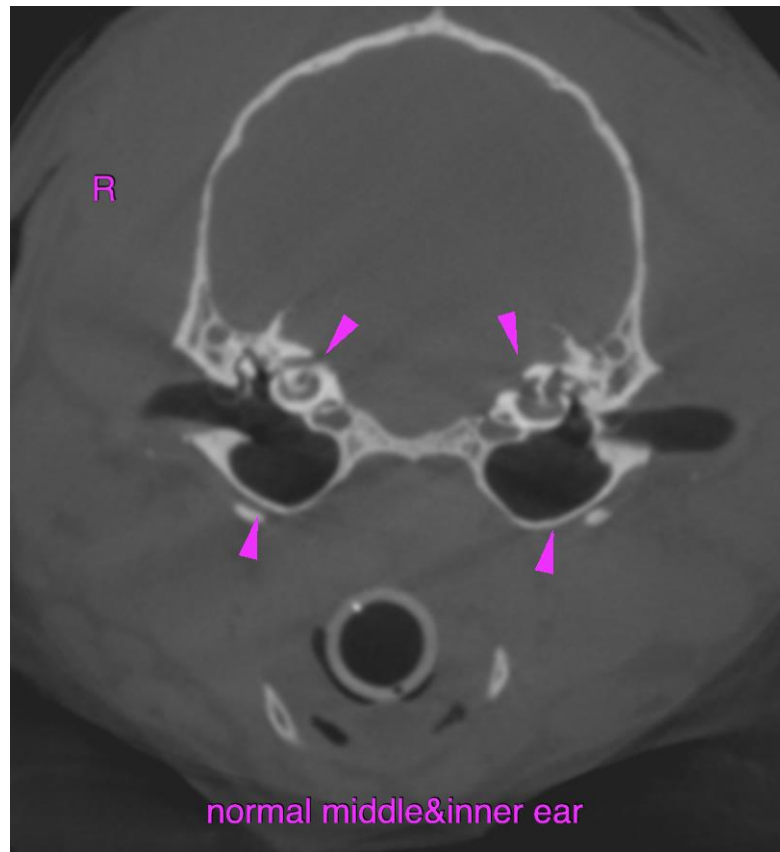
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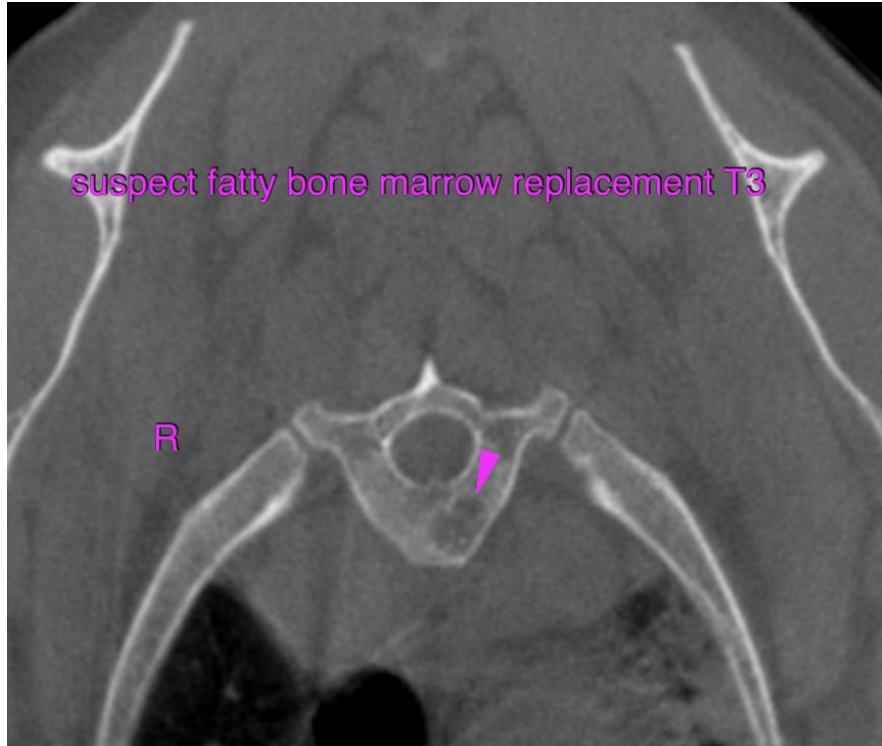
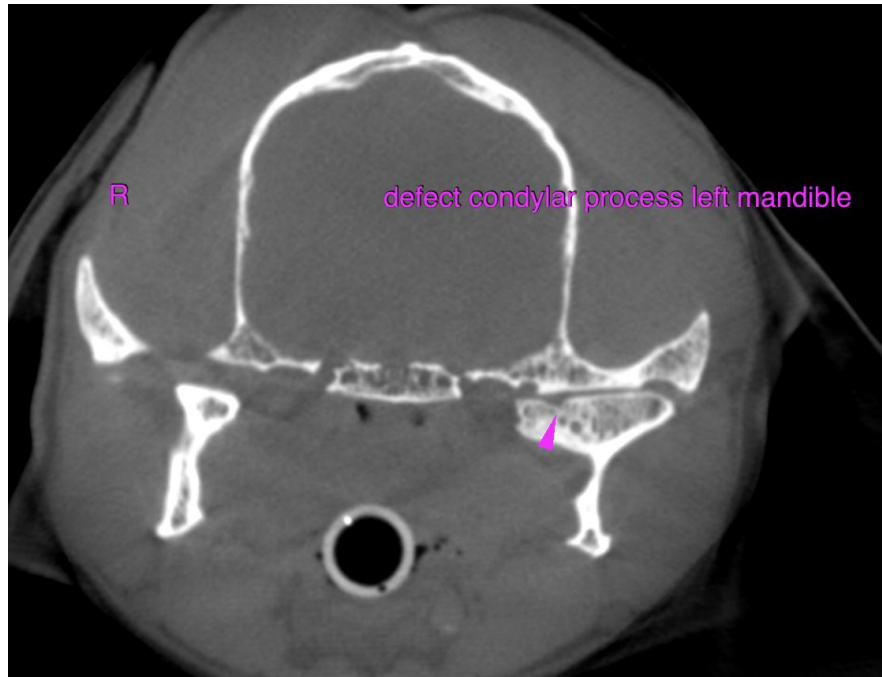
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**SPECIES**

Canine

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