



PATIENT

Frankie Williams

PRESENTING CLINICAL SIGNS

Frankie was brought in for further evaluation of left lower mandibular gingival epulis that was biopsied/debulked in June 2021. Frankie is currently eating and drinking well and overall acts quite normally with good activity and a stable body weight. She was on some medications post procedure but has not been on any medications for the last 2 months. The tumor has grown a lot on size in the last few months since the biopsy/mass debulking procedure. She has also had bad odor from her mouth and has been licking more at her feet recently.

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL

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

BREED

American Pit Bull Terrier

COMPUTED TOMOGRAPHIC FINDINGS

SEX

FS

The right body of the mandible, level with triadan 407 to 409 presents with an amorphous mineralizing mass, protruding from the alveolar surface. The body of the mandible level with the mineralizing mass presents permeative osteolytic lesions and moderate to marked immature periosteal new bone formation. Post contrast administration the mandibular mass presents heterogeneous moderate contrast enhancement.

AGE

7 Years

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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. The external ear canals present mild shell-like mineralization.

HOSPITAL NAME

Southern Oregon
Veterinary Specialty
Center

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 right mandibular lymph nodes are prominent.

REFERRING VET

Kim Winters

- Monostotic primary osteoproliferative mass right body of the mandible
- Lymphadenopathy right mandibular lymph nodes
- Mild dystrophic mineralization external ear canals

COMPUTED TOMOGRAPHIC DIAGNOSIS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

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The findings are consistent with biologically aggressive mass originating from the right body of the mandible and potentials include odontogenic tumor (e.g. acanthomatous ameloblastoma), osteosarcoma, chondrosarcoma, squamous cell carcinoma. Right sided (central) hemimandibulectomy is the therapy of choice - osteotomy lines are distal to triadan 405 and distal to triadan 409.

DATE

2-8-22



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The prominent mandibular lymph node is equivocal for reactive hyperplasia or metastatic spread – recommend FNA sampling. Consider full tumor staging.

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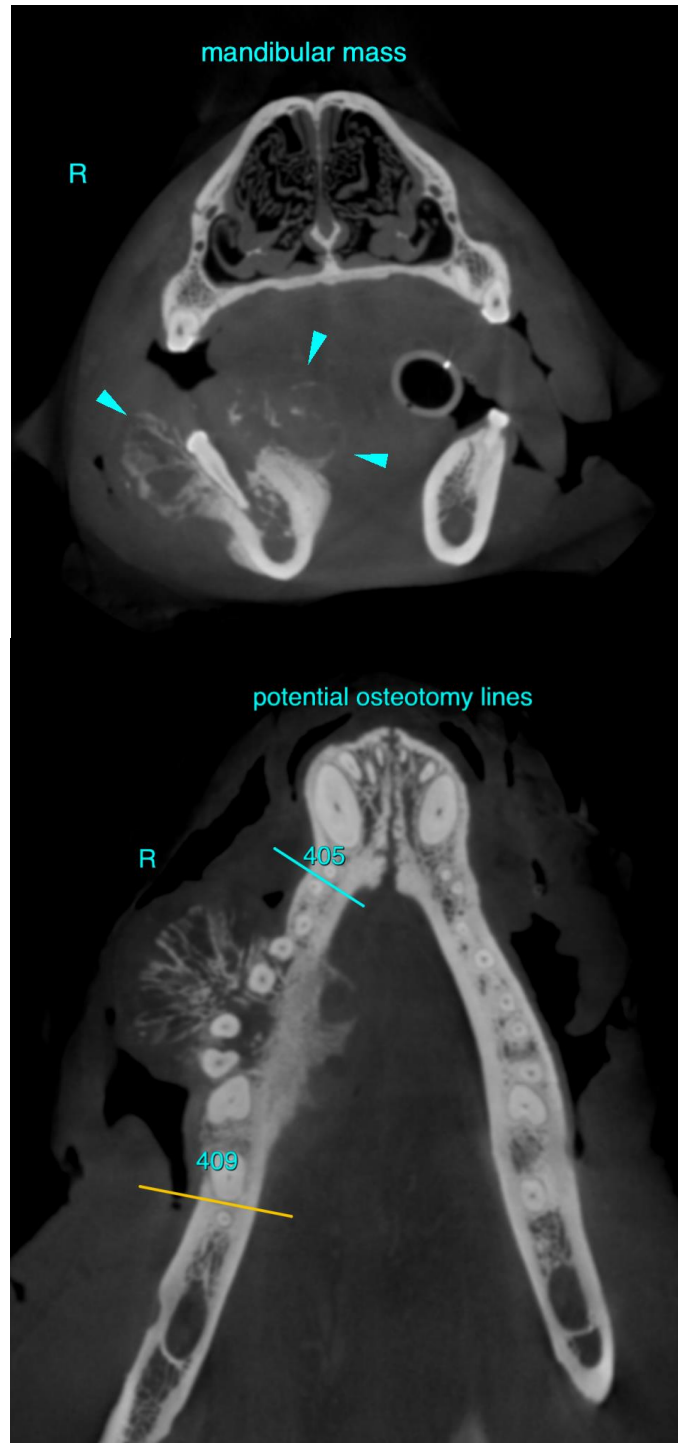
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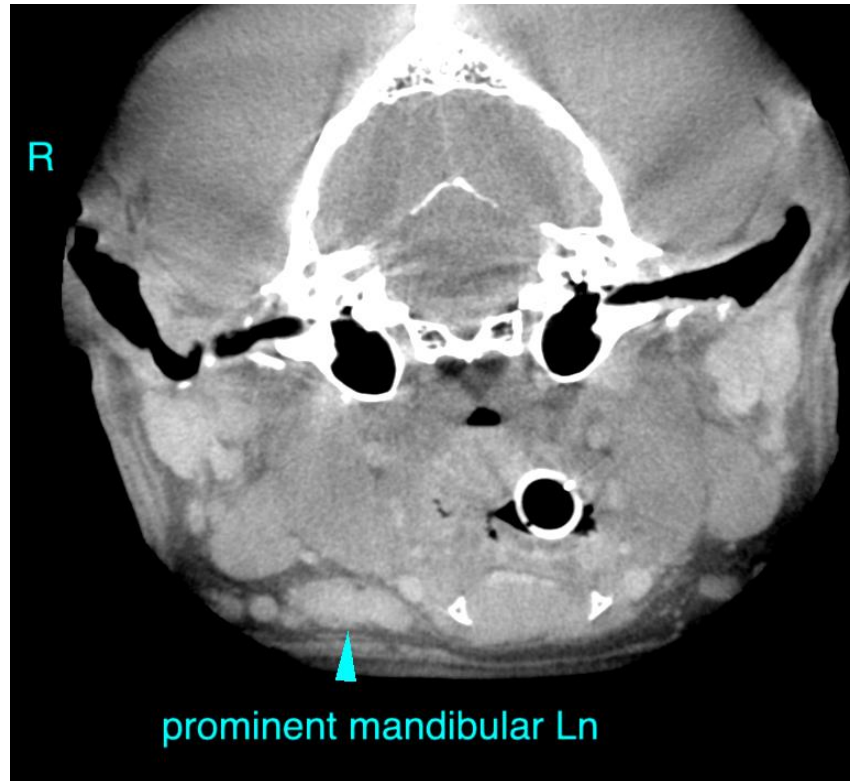
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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