



PATIENT

Milo Hindman

PRESENTING CLINICAL SIGNS

Milo presented for chronic bilateral otitis.

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL

A high resolution plain CT study of the skull including the neck is provided for review.

BREED

Cocker Spaniel

COMPUTED TOMOGRAPHIC FINDINGS

The rostral aspects of the skull present with moderate motion artefacts.

A supernumerary triadan 105 is appreciated.

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

SEX

MN

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 a markedly thickened wall, L>>R and the lumen of the external ear canals is obliterated. The external ear canals present mineralization of the external ear canals.

AGE

4 Years

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation is uniform.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Bilateral chronic proliferative otitis externa, L>>R, with dystrophic mineralization of the external ear canals
- No evidence of otitis media
- Supernumerary triadan 105

HOSPITAL NAME

Critical Vet
Care/Suncoast
Veterinary

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are fitting the history of chronic proliferative otitis externa, L>>R, without evidence of accompanying otitis media. Total ear canal ablation is considered as the therapy of choice.

REFERRING VET

Dr. Young

INVOICE

56681

DATE

2-9-23



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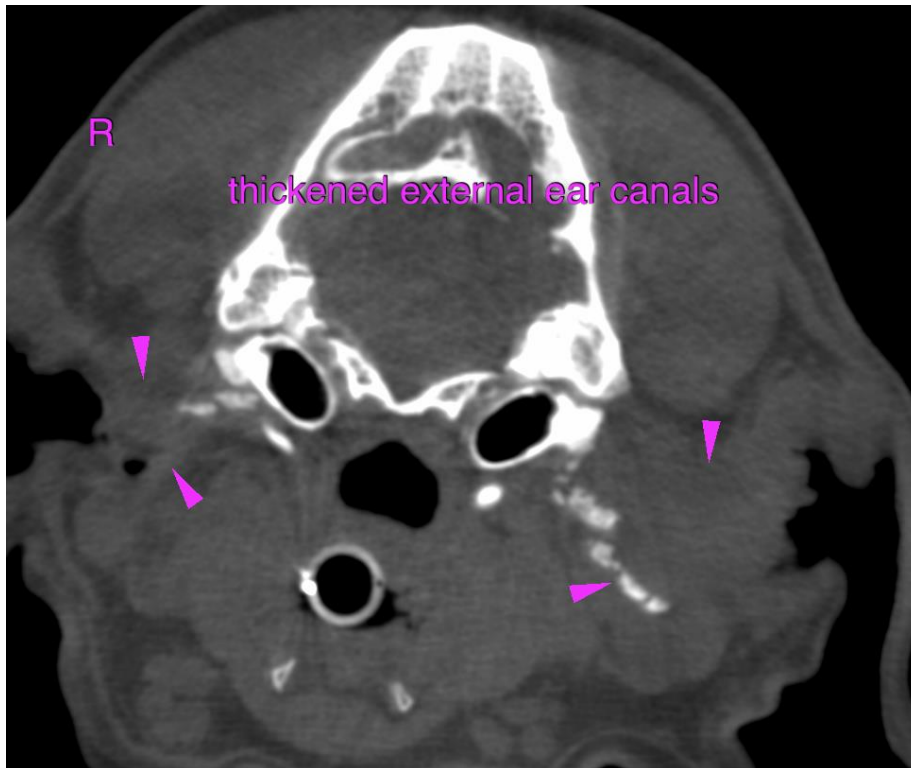
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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