

Diagnostic Imaging

Veterinary CT, Ultrasound & Telectology Services
veterinarian referral only

PATIENT PRESENTING CLINICAL SIGNS

Coco Benson • jt fragments on elbows, interm lameness, swollen bone on orbit, down significantly but still present

SPECIES • Pt presented for check swelling on face. Still there, no worse. Still e/d and acting normal. No abnormal drooling

Canine • Current Medications: Truprofen 100mg bid

BREED COMPUTED TOMOGRAPHY OF THE SKULL & ELBOW JOINTS

Newfoundland A high resolution pre- and post-contrast CT study of the skull and elbow joints are provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

SEX Skull

Female Spayed Triadan 208 is absent, the distal root and buccal mesial root are retained in the alveolar crest.

The rostral aspect of the left zygomatic bone and the caudal aspect of the alveolar process of the left maxillary bone present diffuse sclerosis of the bone along with solid, ill-defined new bone formation – forming an osseous mass centered on the base of the left zygomatic bone.

AGE

5Y

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDDI

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.

HOSPITAL NAME

Rockaway Animal
Hospital

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 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.

REFERRING VET

Dr. Maniar

Elbow joints

The periarticular bones of the left elbow joint present moderate osteophyte new bone formation. The cranial tip of the medial coronoid process of the left elbow joint is irregular hook shaped and has a heterogeneous density. In the proximal aspect of the left flexor muscles – distal to the medial humeral epicondyle – shell like new bone formations are appreciated along with mild irregular surrounding contrast uptake.

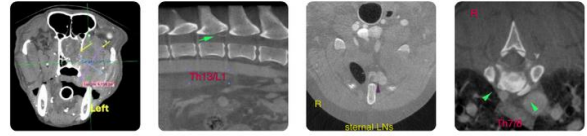
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The right elbow joint has smooth margins of the periarticular bones. The medial coronoid process of the right elbow joint is well-defined and has a homogeneous density. The surrounding soft tissue structures of the right elbow joint are within normal limits.

DATE

3-17-26



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PATIENT COMPUTED TOMOGRAPHIC DIAGNOSIS

- Coco Benson
- Semiaggressive osteoproliferative lesion base left zygomatic arch/alveolar process left maxillary bone
 - Absent triadan 208 with two retained roots
- SPECIES**
- Coronoid disease left elbow joint
 - Osteoarthritis left elbow joint
- Canine
- Flexor enthesopathy left elbow joint with metaplasia
 - Normal right elbow joint

BREED

Newfoundland

SEX

Female Spayed

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The osteoproliferative lesion at the base of the left zygomatic arch presents signs of active osseous remodeling but overall low aggressive imaging features – differentials can include osteoma formation (commonly more well-defined/smooth surface), sclerosing osteomyelitis or primary osseous neoplasia – such as chondroma, osteosarcoma. Recommend biopsy for specification.

The degenerative joint disease of the left elbow joint is a sequela to elbow dysplasia.

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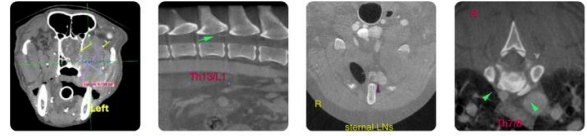
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SonoPath.com | info@sonopath.com | 1 (800) 838-4268
141 Main St, Andover, NJ 07821

PATIENT

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SPECIES

Canine

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Newfoundland

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Female Spayed

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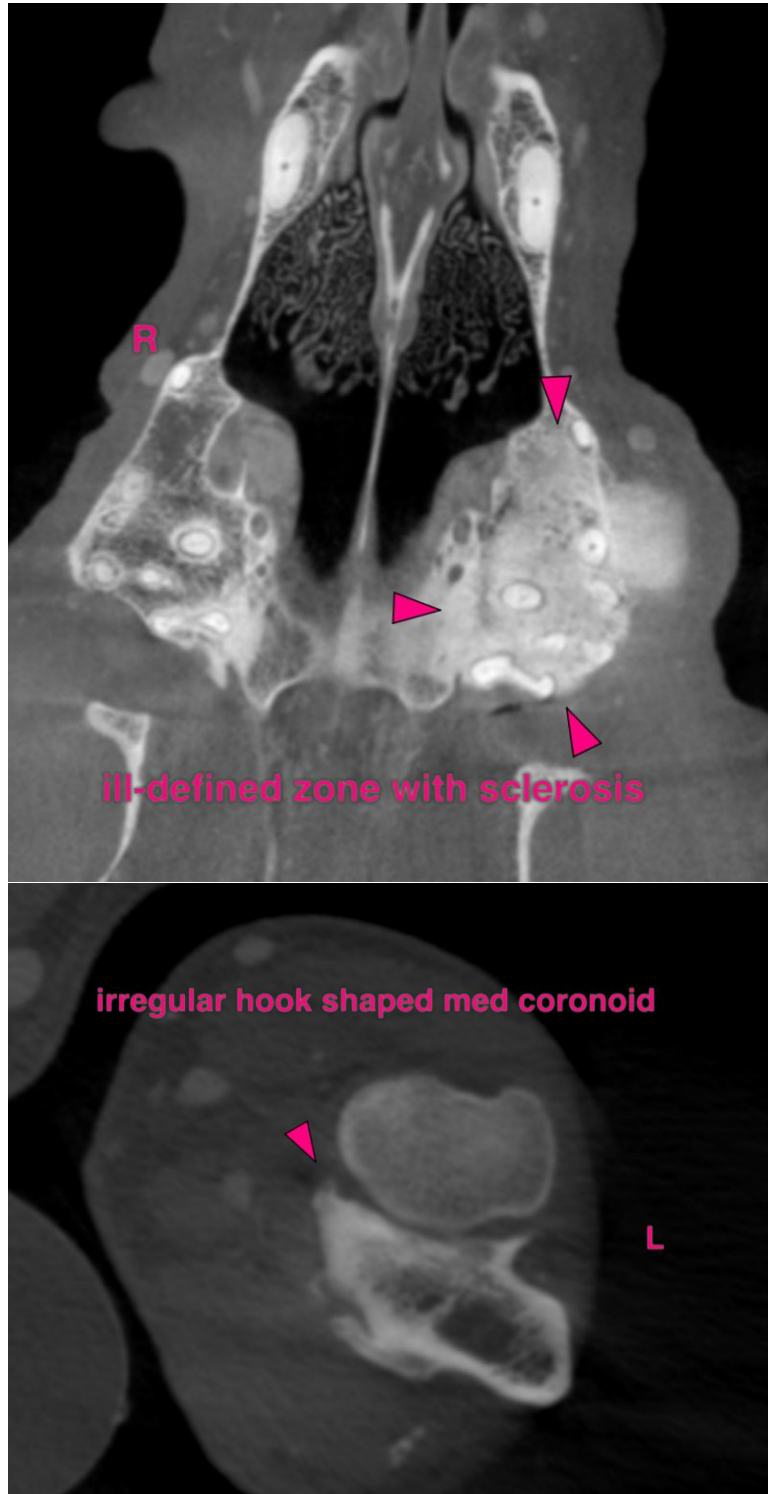
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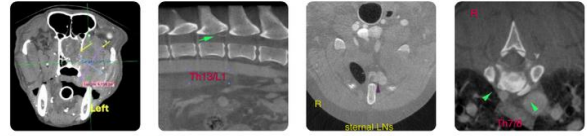
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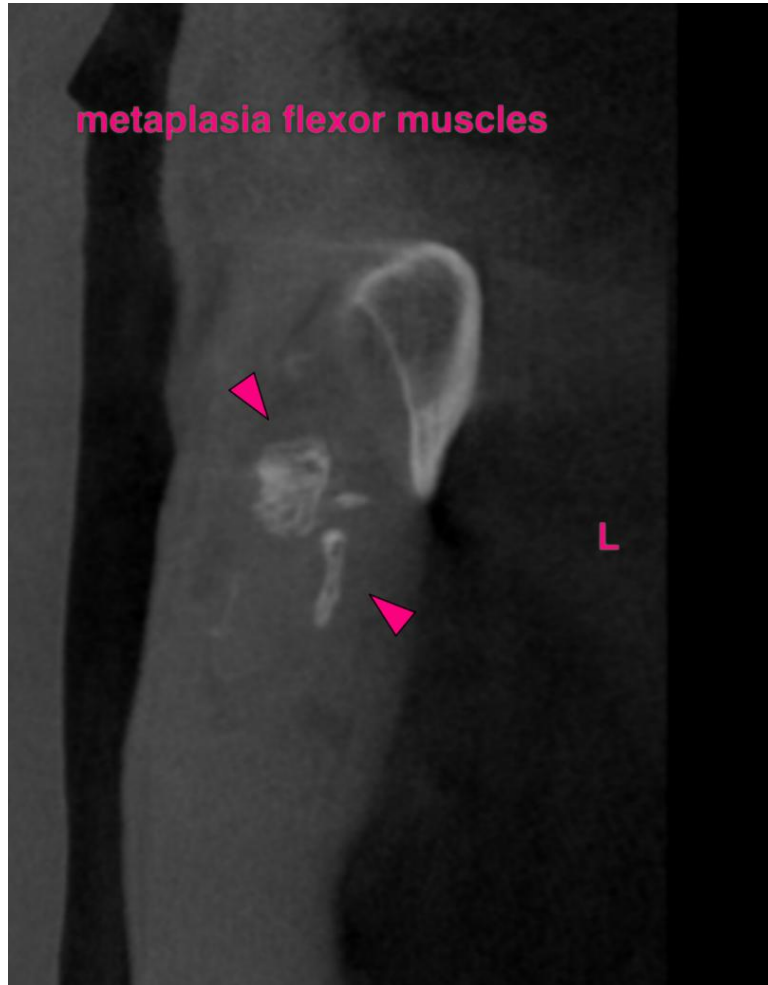
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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