



PATIENT

Bel Gann

PRESENTING CLINICAL SIGNS

blindness and behavioural change - progressive over three-four weeks - menace/plr both ablated
 - protrusion third eyelids
 Abnormal PE/Chem/CBC/UA Results: anaemia non regen

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL

A pre- and post-contrast CT study of the skull in a bone and soft tissue reconstruction is provided for review.

BREED

Border Collie

COMPUTED TOMOGRAPHIC FINDINGS

The pictured parts of the dentition are complete and unremarkable in all jaw quadrants.

SEX

Female

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.

AGE

4

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.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

In the ventral aspect of the cranial fossa, originating from the sellar and parasellar region, a homogenous moderate contrast enhancing semicircular shaped mass is protruding into the cranial fossa, measuring 2.2 x 1.4 x 2.0 cm in size. The mass in the ventral aspect of the cranial fossa presents a broad base the sphenoid bone. The diencephalon is distorted by the mass effect. In the rostral aspect the mass is extending mildly into the left orbital fissure.

HOSPITAL NAME

Advanced Veterinary
 Imaging

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.

COMPUTED TOMOGRAPHIC DIAGNOSIS

REFERRING VET

Ella Richardson

- Intracranial extraaxial mass originating from the floor of the cranial fossa

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The intracranial extraaxial mass is compatible with primary neoplasia and potentials include meningioma, round cell tumor, craniopharyngioma, granulosa cell tumor. The mass is a plausible explanation for the described clinical signs. The chances of radiation therapy might be discussed with oncologist.

INVOICE

50750

DATE

3-6-22



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REFERRING VET

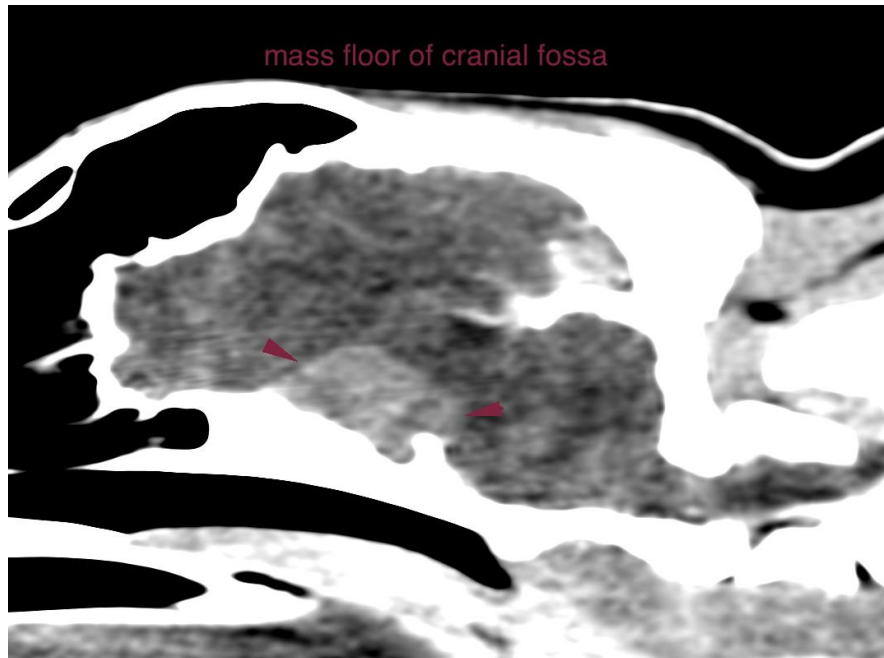
Ella Richardson

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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

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