



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Chusmy Torres **PRESENTING CLINICAL SIGNS** History: PATIENT PRESENTED A SEVERE EAR INFECTION THAT DO NOT RESPOND TO TREATMENT. EAR CULTURE AND TREATMENT GUIDED WAS PERFORMED WITH NO RESOLUTION OF CLINICAL SIGNS.

SPECIES Abnormal PE/Chem/CBC/UA Results: BUN 37
Canine

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL

BREED A high resolution pre- and post-contrast CT study of the skull and abdomen and a post-contrast CT study of the thorax are provided for review.
Mixed

COMPUTED TOMOGRAPHIC FINDINGS

SEX The tooth elements 106, 205, 206 and 305 are absent. All premolar and molar teeth present evidence of advanced periodontal disease.
Spayed Female

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

11 Years Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

INTERPRETED BY Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals present a mild thickened wall. The horizontal segment of the left external ear canal presents small polypoid protrusions, bulging into the lumen.

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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.

HOSPITAL NAME The ventricular system is non-dilated and symmetric.

Hospital Veterinario San Francisco de Asis The mandibular lymph nodes are prominent.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- REFERRING VET** Dr. Rodriguez
- History of otitis externa with possible small polypoid proliferations in the left external ear canal
 - Advanced generalized periodontal disease
 - Lymphadenopathy mandibular lymph nodes – reactive hyperplasia is most likely
 - Multiple absent teeth
 - No evidence of otitis media

INVOICE INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

22002 The small polypoid proliferation of the wall of the left external ear canal can be a sequela to otitis externa, theoretically early stage of neoplastic transformation (e.g. ceruminous gland)

DATE
4/13/23



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 adenocarcinoma) is a differential. There is no sign for accompanying otitis media. As clinical signs are refractory to conservative therapy, surgical management by the means of total ear canal ablation might be considered.

A complete dental workup is considered beneficial.

SPECIES

Canine

BREED

Mixed

SEX

Spayed Female



AGE 11 Years
 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.

INTERPRETED BY

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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HOSPITAL NAME

Hospital Veterinario
 San Francisco de Asis

REFERRING VET

Dr. Rodriguez

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