



PATIENT PRESENTING CLINICAL SIGNS

Riley Del Bosque Previous dental with extractions in Dec. Presented last month for falling over, ataxic, circling outside but not all the time. Left eye hyperemia. Nasal discharge. Owner reports signs of Horner's syndrome. Abnormal PE/Chem/CBC/UA Results: Ambulatory x 4 but generalized ataxia/disorientation noted.

SPECIES COMPUTED TOMOGRAPHY OF THE SKULL

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

BREED COMPUTED TOMOGRAPHIC FINDINGS

Mixed Triadan 308 and 404 are absent.

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

SEX

Neutered Male In the caudoventral aspect of the vitreous chamber of the left ocular bulb, a moderate contrast enhancing convex shaped mass is noted, measuring 6.5 mm in size.

AGE

11 Years 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 are within normal limits.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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. Protruding from the pituitary fossa, a cone shaped moderate contrast enhancing mass is noted, measuring 9 x 10 x 7 mm in size. The ventricular system is non-dilated and symmetric.

HOSPITAL NAME

Mobile Pet 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.
The right thyroid gland presents with a post contrast hypoattenuating, mild irregular marginated parenchymal lesion, measuring 6.6 mm in diameter.

REFERRING VET

Meaux

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Intracranial extraaxial mass originating from the pituitary fossa
- Intraocular mass left ocular bulb
- Suspect right thyroid cyst
- Absent triadan 308&404
- No evidence of otitis media & interna

INVOICE

51538

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

4-14-22

The small mass originating from the pituitary fossa is highly suggestive for (non)functional pituitary macroadenoma. Testing of the pituitary-adrenal axis can be used as advanced diagnostic test. No specific underlying cause for the described neurological clinical signs is appreciated; if there was an



PATIENT acute onset of clinical signs, ischemic insult and/or geriatric vestibular syndrome is a potential differential diagnosis.

Riley Del Bosque

If not yet done so, the workup should be complemented by examination of CSF and complete bloodwork to screen for brain disease that is not necessarily associated with structural changes of the brain parenchyma and rule out other systemic illness. MR imaging may be indicated in case of the strong suspicion of structural parenchymal changes of the brain.

SPECIES

Canine

The intraocular mass is concerning for intraocular neoplasia, such as retinal astrocytoma, round cell tumor or sarcoma. Recommend complete ophthalmological exam for further definition.

BREED

Mixed

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Neutered Male

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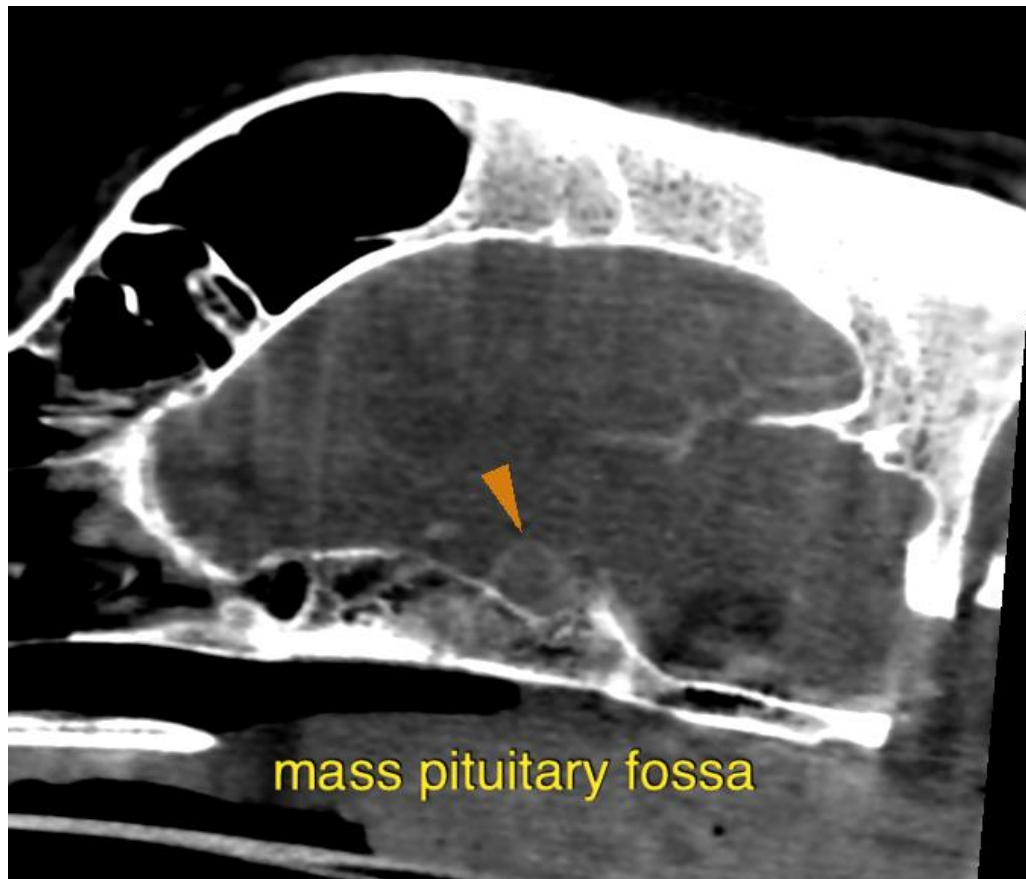
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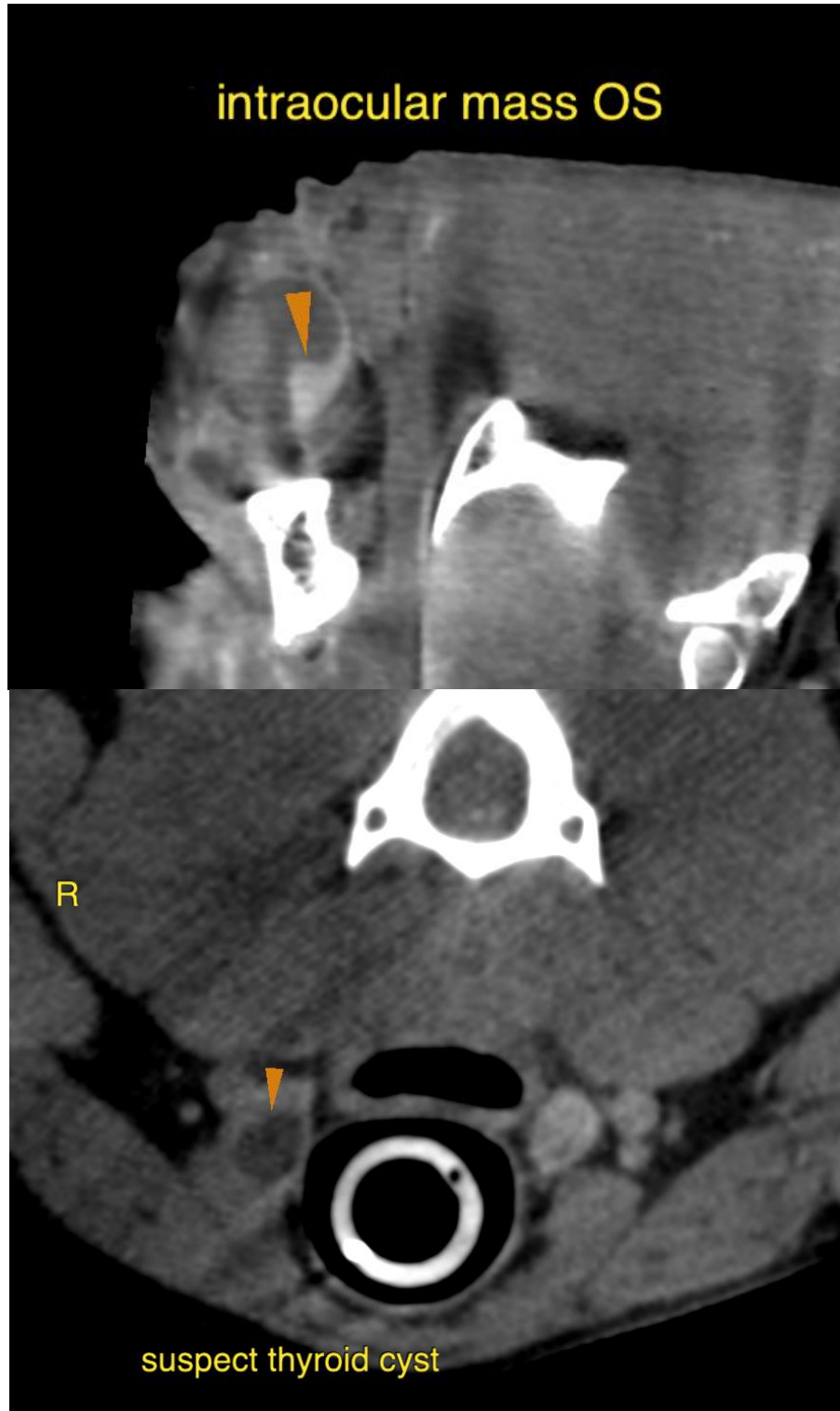
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SPECIES

Canine

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.

BREED

Mixed

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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