



PATIENT PRESENTING CLINICAL SIGNS

Charley Costa Charley presented for growths around body, right shoulder, left hip, right hind, and in her mouth

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

SPECIES 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.

Canine

COMPUTED TOMOGRAPHIC FINDINGS

BREED

Skull

Pitbull

Splaying of triadan 401 & 402 is appreciated and a soft tissue attenuating and homogeneous mild contrast enhancing mass is protruding from the gingival lining level at the same level; measuring 9 x 10 x 14 mm in size. Mild widening of the alveolar crest of triadan 402 is appreciated. Distal to triadan 204 a second small gingival growth is appreciated, measuring up to 6 mm in size. Multifocal small protrusions of the gingival lining are seen along the premolar and molar teeth.

SEX

FS

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

AGE

10 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. The ventricular system is non-dilated and symmetric.

HOSPITAL NAME

Animal Surgical
Center

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.

Thorax

REFERRING VET

VCA East Meadow

In the subcutaneous tissue at the lateral aspect of the right scapula, a well-defined, roundish, soft tissue attenuating and heterogeneous contrast enhancing nodule is seen, measuring 14 x 10 x 12 mm in size.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

INVOICE

51769

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

DATE

4-26-22

The lung parenchyma presents the expected architecture and attenuation behavior with interspersed punctuate mineralization and mild dystelectasis of the ventral dependent aspects of the lung.



PATIENT

Charley Costa

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

COMPUTED TOMOGRAPHIC DIAGNOSIS

SPECIES

Canine

- Gingival mass between 401&402 with widening of the periodontal space of triadan 402 with secondary deviation of the respective teeth
- Multiple small gingival soft tissue proliferations
- Non-specific subcutaneous soft tissue nodule lateral to right scapula
- Pulmonary osteomas
- No evidence of pulmonary metastatic disease

BREED

Pitbull

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

FS

The most likely differential for the mediastinal masses is epulis fibromatosa, excisional biopsy can be used to confirm the diagnosis and ruling out more invasive growing masses, such as acanthomatous ameloblastoma or less likely more aggressive neoplastic disease such as melanoma, squamous cell carcinoma, other.

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Consider FNA sampling of the subcutaneous nodule lateral to the right scapular for further workup.

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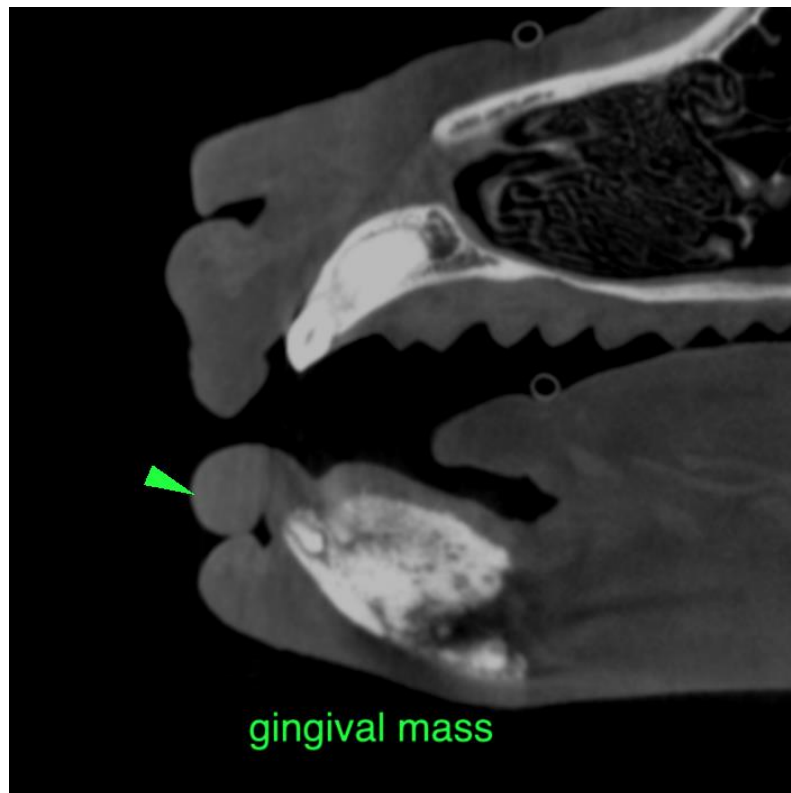
VCA East Meadow

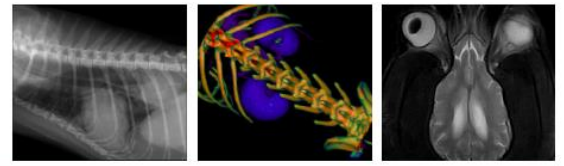
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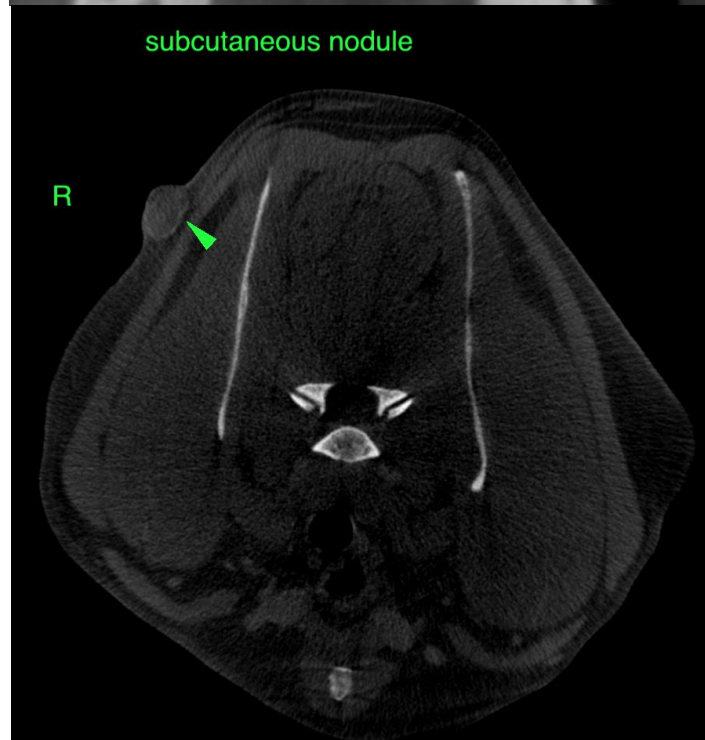
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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