**PATIENT**

Bentley Núñez

**SPECIES**

Canine

**BREED**

German Shepard

**SEX**

MN

**AGE**

4 Years, 3 Months

**INTERPRETED BY**

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Mobile Pet Imaging
CFL

**REFERRING VET**

Borecky

**INVOICE**

51995

**DATE**

5-9-22

## PRESENTING CLINICAL SIGNS

Clear Nasal Discharge x Several Months

## COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

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

## COMPUTED TOMOGRAPHIC FINDINGS

Skull

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

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.

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.

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.

The esophagus is generalized mild to moderately distended by gas.

Thorax

The bony and surrounding soft tissue structures are within normal limits.

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.

The cardia and a small portion of the fundus of the stomach are bulging into the caudal mediastinum

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.

The lung parenchyma presents the expected architecture and attenuation behavior.

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

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## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Mild sliding hiatal hernia – likely secondary to general anesthesia
- Megaesophagus – considered as sequela to general anesthesia, due to lack of respective clinical signs (e.g. regurgitation)
- Normal skull

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study of the skull presents without abnormalities, explaining the described clinical signs and the presumptive diagnosis is non-specific rhinitis – such as lymphocytic plasmocytic or eosinophilic rhinitis. Rhinoscopy including sampling for histopathology and microbial culture can be used as advanced diagnostic tests.

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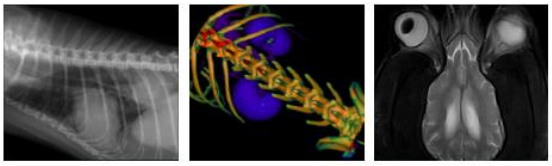

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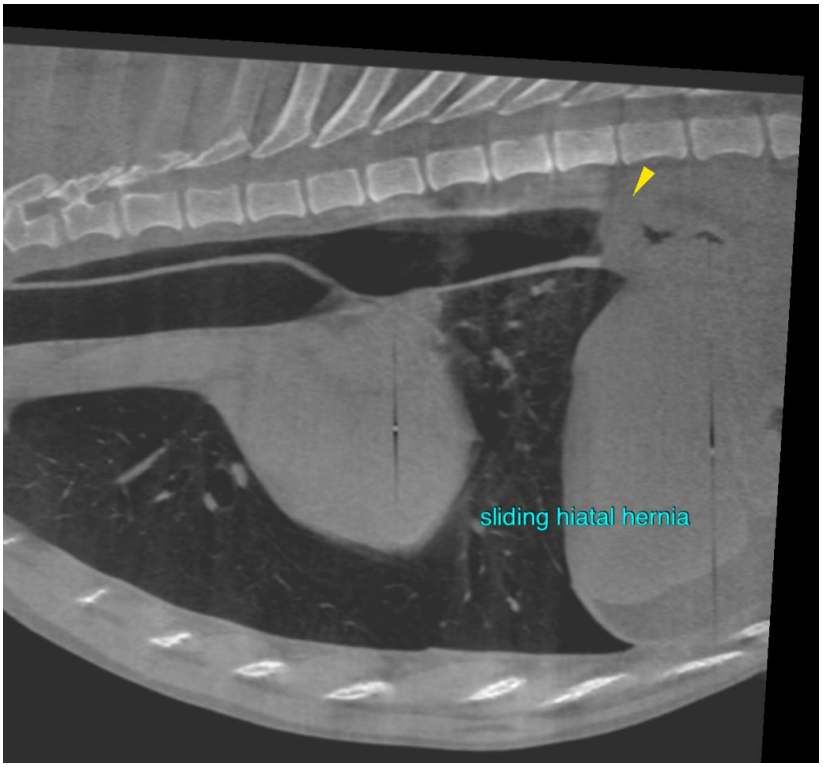


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**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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.

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
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