



**PATIENT**

Jack Arbuckle

**PRESENTING CLINICAL SIGNS**

Pt presented for chronic ear infections. Dr noted substantial odor and pus coming from the left ear and a sizable swelling of the neck and surrounding tissue. Was referred for CT of head and neck to determine cause of swelling and ear infection.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: pre-op panel 6-14-22: neutrophilic (19K) leukocytosis (21K) with mild hyperglycemia.

**COMPUTED TOMOGRAPHY OF THE SKULL AND NECK**

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

**BREED**

Doberman Mix

**COMPUTED TOMOGRAPHIC FINDINGS**

The tooth elements 305&405 are absent.

**SEX**

Male Neutered

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**

9 Years

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The wall of the left external ear canal is markedly swollen, and a mild amount of fluid attenuating material is seen in the lumen of the left external ear canal. Mild to moderate shell-like mineralization of the external ear canals bilaterally is appreciated.

**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**

Parrish Creek  
Veterinary Clinic

The left medial retropharyngeal lymph node is significantly enlarged, rounded, uniform soft tissue attenuating and presents a heterogeneous contrast enhancement pattern with a fluid attenuating zone eccentrically locate zone. The surrounding fat in the left retropharyngeal region presents a marked soft tissue striation and swelling. The larynx is deviated to the right by the mass effect. The left mandibular lymph nodes are prominent. The local musculature presents a mild heterogeneous contrast enhancement pattern.

**REFERRING VET**

Dr. Scott Echols

The left mandibular salivary gland is mildly swollen with interspersed fluid attenuating thin bands.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Lymphadenopathy left medial retropharyngeal lymph node with a zone of cavitation and marked surrounding steatitis left retropharyngeal region
- Mild inflammatory edema left mandibular salivary gland and myositis
- Left sided marked otitis externa
- Dystrophic mineralization external ear canals bilaterally
- Absent triadan 305&405
- No evidence of otitis media

**INVOICE**

52465

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6-15-22



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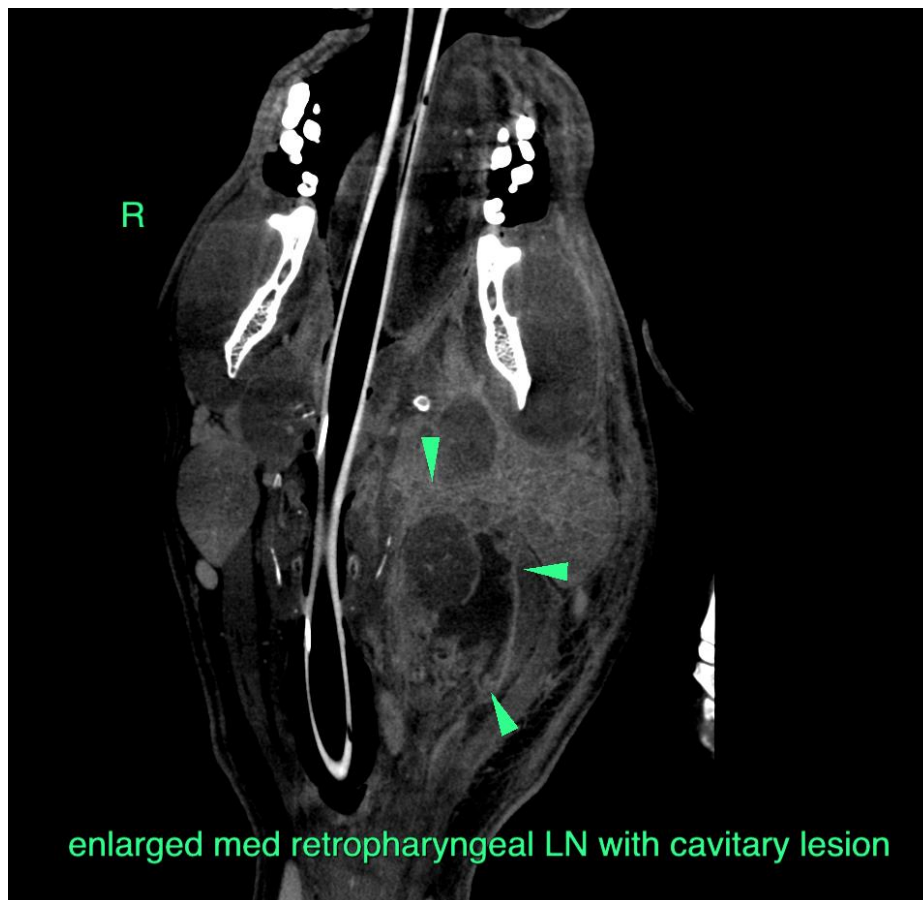
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The findings of the left medial retropharyngeal lymph node are highly suggestive for lymphadenitis with abscessation of the left medial retropharyngeal lymph node. The left sided otitis externa might be the trigger for the septic lymphadenitis. Either ultrasound guided drainage of the abscess of the left medial retropharyngeal lymph node or surgical management are recommended. Consider sampling for microbial culture and cytology/biopsy to rule out neoplastic infiltration.

A total ear canal ablation might be considered after remission of the septic steatitis in the left retropharyngeal region.





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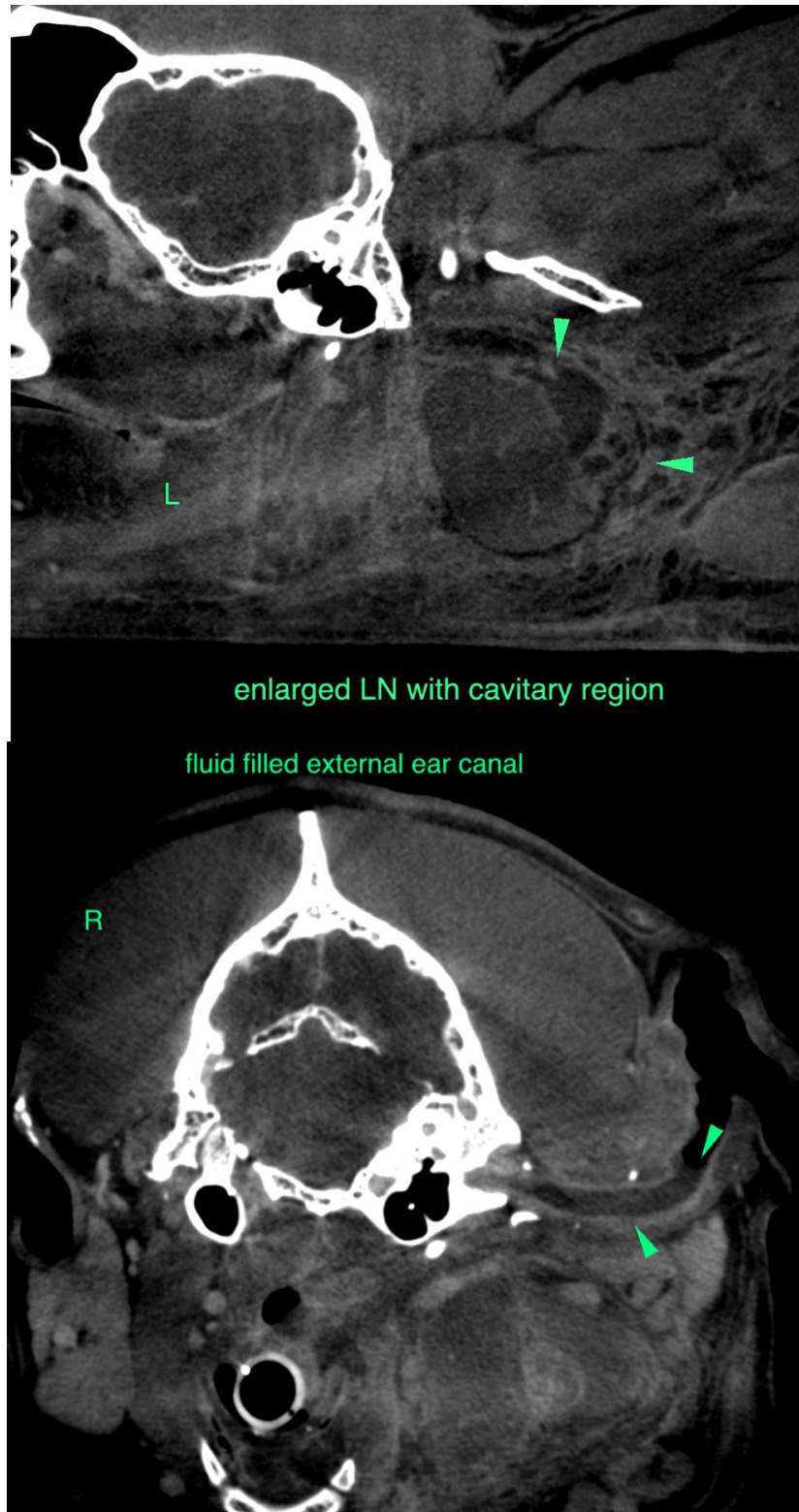
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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  
sebast.schaub@gmail.com

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