



PATIENT PRESENTING CLINICAL SIGNS

Sonny Caldwell Periorbital swelling OD, suspected secondary to sialoceles (hx drained sialoceles 03/09/2022). Owner interested in pursuing sx.

SPECIES COMPUTED TOMOGRAPHY OF THE SKULL

Canine A pre- and post-contrast CT study of the skull in a bone and soft tissue reconstruction is provided for review.

BREED COMPUTED TOMOGRAPHIC FINDINGS

Beagle Extending from the dorsomedial aspect of the right orbit caudoventrally, up to the ventral aspect of the right tympanic bulla, a central fluid attenuating mass is appreciated; post contrast administration the mass is demarcated by a mild irregular marginated moderate contrast enhancing capsule. The mass is depressing the dorsomedial wall of the right orbit and is mildly bulging into the left frontal sinus. The right hamulus of the pterygoid bone presents evidence of pressure erosion and is deviated medially into the nasopharynx. The nasopharynx is distorted and partially obliterated by the mass. The right ocular bulb is displaced rostrally by the mass effect.

SEX

Male Neutered

The right tympanic bulla contains a moderate amount of non-contrast enhancing soft tissue material, the osseous lining is smooth and thin.

AGE

11 Years

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

HOSPITAL NAME

Green Dog Dental and Wellness

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.

REFERRING VET

Ren Garcia, DVM

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.

In the subcutaneous tissue at the caudoventral aspect of the right mandible, a well-defined small lipoma is appreciated.

INVOICE

52602

In the subcutaneous tissue at the dorsal aspect of the neck, level with C4, a well-defined, soft tissue attenuating nodule, measuring 12 mm in size is appreciated.

COMPUTED TOMOGRAPHIC DIAGNOSIS

DATE

6-27-22

- Expansile growing cavitory mass extending from the mediadorsal aspect of the right orbit caudoventrally into the retropharyngeal region – ventral to the tympanic bulla
- Pressure erosion of the right frontal bone and pterygoid bone
- Partial obstruction of the nasopharynx by the mass effect
- Secondary right sided exophthalmos



PATIENT

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- Right sided otitis media – likely secondary to mechanical obstruction of the Eustachian tube by the cavitory mass
- Lipoma right submandibular region
- Non-specific subcutaneous nodule dorsal aspect of the neck

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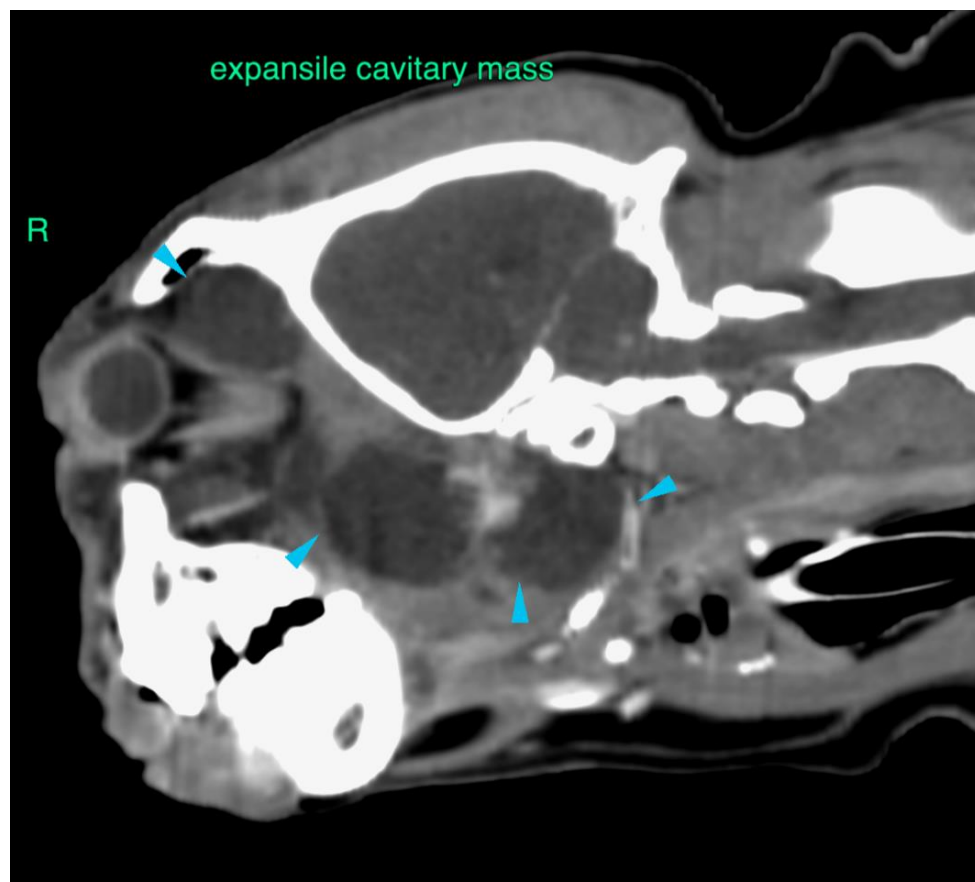
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The diagnosis of sialoceles is not definitive in this case, as the extend of the cavitory lesion is unusual and just a small contact with the zygomatic gland is appreciated without signs for dilation of the ductal system of the right zygomatic salivary gland. I would consider the odds for myxosarcoma higher than for sialoceles. Recommend tapping the fluid content for cytology and consider biopsy of the capsule for further definition. A zygomatic sialogram might also help in differentiation between sialoceles and myxosarcoma.





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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

Beagle

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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