



**PATIENT PRESENTING CLINICAL SIGNS**

**Sarge (No name 59)**  
Lees

**SPECIES**

Canine

**BREED**

Canine

**SEX**

Male

**AGE**

4 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Colyton Veterinary Hospital

**REFERRING VET**

Dalton Nguyen

**INVOICE**

52334

**DATE**

6-7-22

**\*\*Staff pet\*\*** Patient presents for 6 months of oral pain and yelping associated with eating. Eating normal amounts of food but has lost 2kg of weight. Yelps when chewing but is fine at other times. No other abnormalities on exam. Thoracic radiographs unremarkable Normal oral and airway exam under sedation. CT scan of the head chest abdomen performed. Please interpret CT scans of the head and neck for a potential pathological cause?

Abnormal PE/Chem/CBC/UA Results: Specialist abdominal u/s - March 2021 RGN: abdominal ultrasound examination Findings: 1. normal liver, gallbladder, spleen, kidneys, urinary bladder 2. GIT has normal layering and thickness 3. no pancreatic abnormality evident 4. caudal mesenteric lymph nodes rounded and hypochoic with subtle increased echogenicity of medulla - approx 7mm and 5.5mm diameter interpretation: Reactive mesenteric lymphadenopathy - IBD vs food intolerance/allergy - would require biopsy for definitive diagnosis. Does not preclude contribution of behavioural issues to some of clinical signs, but behavioural issues cannot explain lymph node enlargement. Blood work - within normal limits.

**COMPUTED TOMOGRAPHY OF THE SKULL & NECK**

A pre- and post-contrast CT study of the neck and a pre- and post-contrast CT study of the neck in a bone and soft tissue reconstruction are provided for review

**COMPUTED TOMOGRAPHIC FINDINGS**

Triadan 306&406 are absent. A supernumerary triadan 305 and 405 is present.

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. 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 osseous and surrounding soft tissue structures of the neck are within normal limits.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Supernumerary triadan 305&405
- Absent triadan 306&406
- Normal neck



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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT study of the skull and neck present without macromorphological abnormalities, explaining the described clinical signs. Unfortunately, only a plain CT study of the skull was available, and lesions might be missed in plain CT study only.

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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.**

**INVOICE**

52334

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.

**DATE**

6-7-22

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