



PATIENT

Durumi Joo

PRESENTING CLINICAL SIGNS

Coughing worsened in the last 3 months, suspected tracheal collapse. Perineal mass excision 2 weeks ago and small throat mass was noted upon intubation. Was intubated post CT and oral exam revealed very large mass almost covering entire airway, FNA of mass performed July 18th

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

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

BREED

Maltese

COMPUTED TOMOGRAPHIC FINDINGS

Skull

Multiple teeth are absent.

SEX

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

MN

Moderate motion artefacts are seen along the region of the larynx. In the left dorsal aspect of the laryngopharynx, a strong contrast enhancing, ovoidal mass is visible, measuring 1.0 x 1.0 x 1.6 cm in size. The mass in the laryngopharynx appears to merge with the left arytenoid cartilage.

AGE

12 Years

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

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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

Dr Jeffery Biskup

The intervertebral disc space C6/C7 is collapsed, and a vacuum phenomenon is seen in the intervertebral disc space.

The periarticular bones of both shoulder joints present mild osteophyte new bone formation.

INVOICE

52922

Significant dorsoventral flattening of the caudal cervical tracheal segment is noted.

The vertebral endplates of the thoracolumbar junction of the spine present moderate spondylosis formation.

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

DATE

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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 mild ground glass attenuating



PATIENT parenchyma with motion artefacts.

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

SPECIES **COMPUTED TOMOGRAPHIC DIAGNOSIS**

Canine

- Soft tissue mass in laryngopharynx – suspect origin in left arytenoid cartilage – with upper airway obstruction
- Tracheal collapse
- Chronic discopathy C6/C7
- Multiple absent teeth
- Degenerative osteoarthritis shoulder joints bilaterally
- Spondylosis deformans

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The main finding is the mass in the laryngopharynx, that appears to originate from the left arytenoid cartilage. Laryngeal granuloma or neoplasia (e.g. round cell tumor, melanoma, squamous cell carcinoma, chondrosarcoma) need to be considered. FNA sampling has already been performed for further definition.

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The tracheal collapse is likely to contribute to clinical signs as well.

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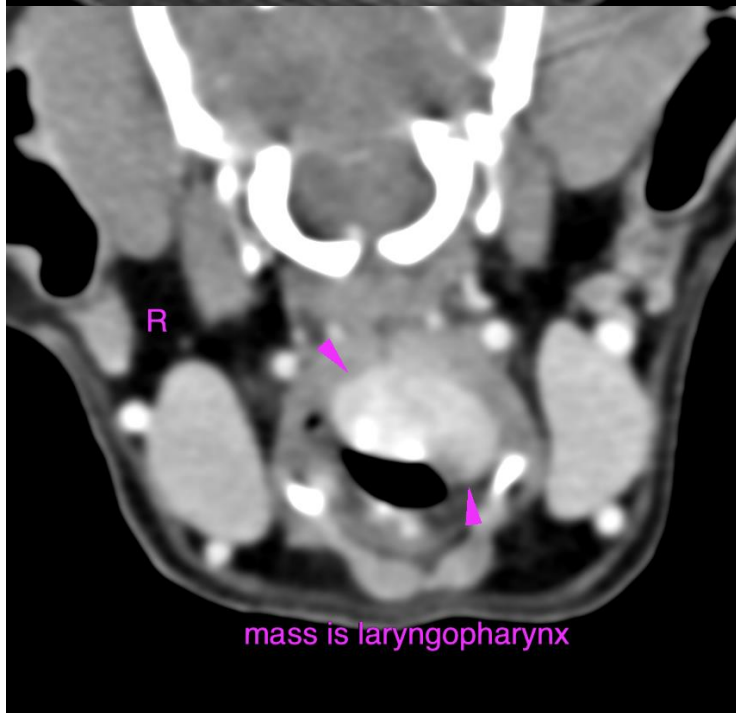
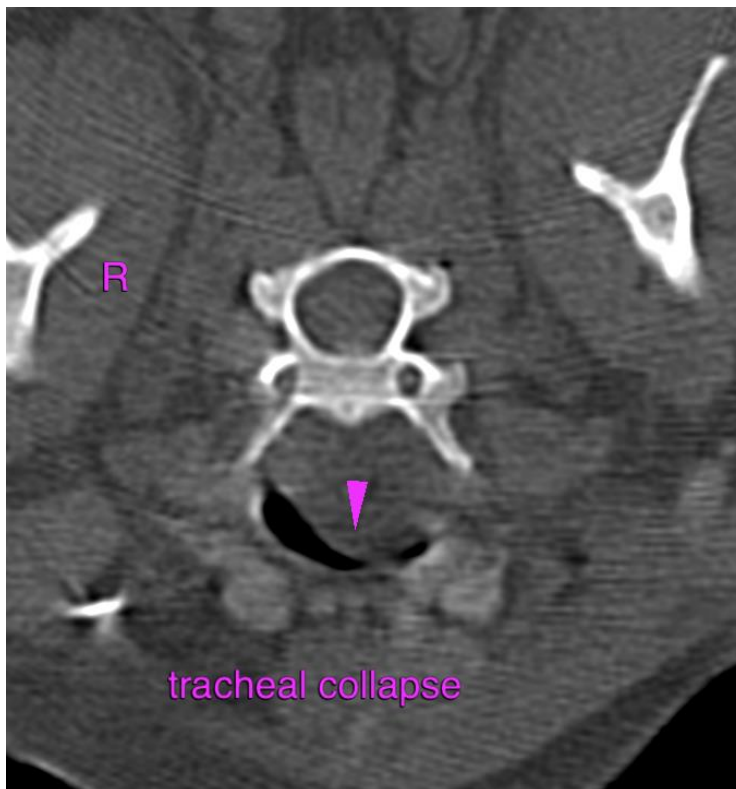
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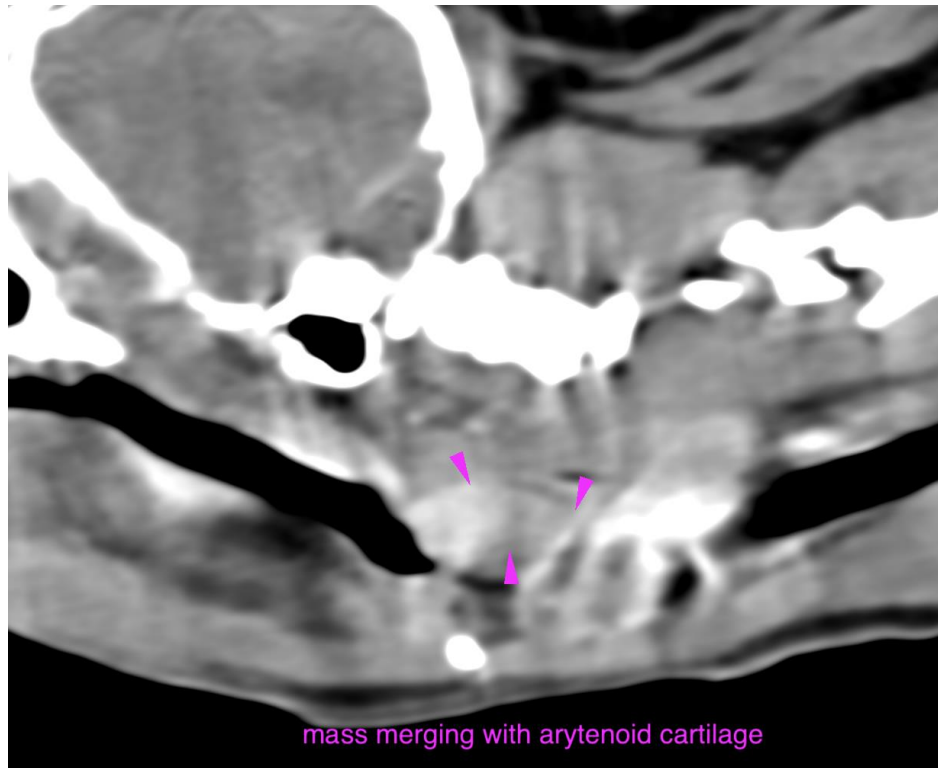
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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