



**PATIENT**

Peaches Vowles

**PRESENTING CLINICAL SIGNS**

Potential foreign body near the trachea that is stuck, fluid lump hasn't resolved.

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY OF THE NECK**

A high resolution plain and positive contrast fistulography CT study of the neck is provided for review.

**BREED**

Golden Retriever

**COMPUTED TOMOGRAPHIC FINDINGS**

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.

**SEX**

F Intact

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.

**AGE**

1 Year

The submandibular and medial retropharyngeal lymph nodes are prominent.

At the right lateral aspect of the larynx, an ill-defined, fusiform soft tissue swelling is appreciated, presenting a central spindle shaped, mild hyperattenuating body, measuring 19 mm in length and 4 mm in diameter.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

In the fistulography, a small amount of contrast is extending up into the swelling at the right lateral aspect of the larynx.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**HOSPITAL NAME**

Mountain West  
Veterinary Hospital

- Foreign body related granuloma right lateral aspect of the larynx
- Mild lymphadenopathy medial retropharyngeal and mandibular lymph nodes

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**REFERRING VET**

Andrew Burton

The CT study is consistent with granuloma formation at the right lateral aspect of the larynx with central foreign body (possible grass awn or small stick). Surgical removal of the foreign material is the therapy of choice – ultrasound can help to localize the foreign material during surgical intervention.

Secondary reactive hyperplasia of the tributary lymph nodes.

**INVOICE**

53081

**DATE**

7-25-22



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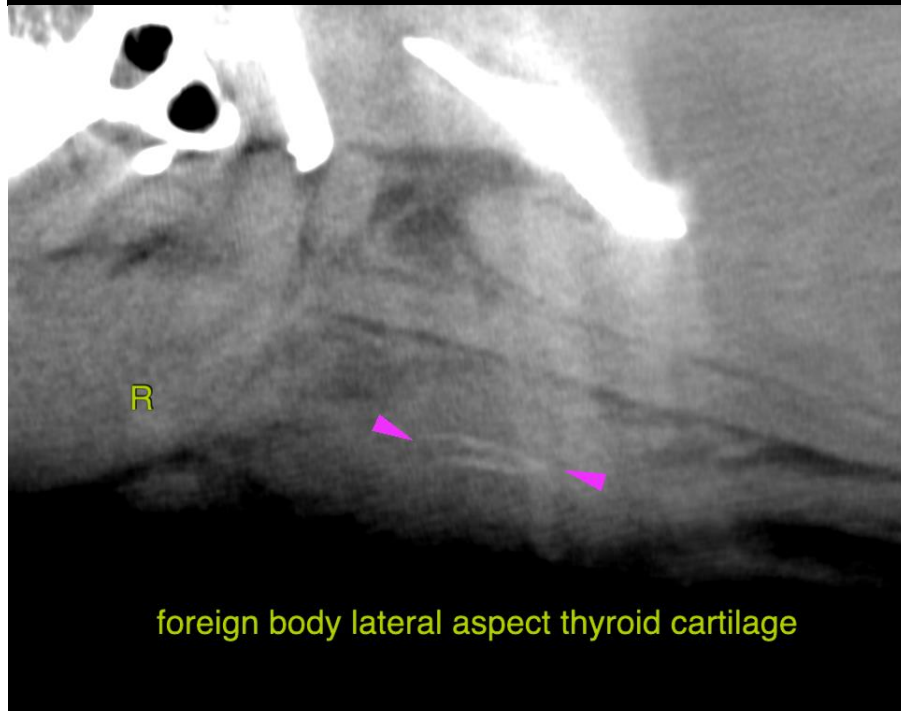
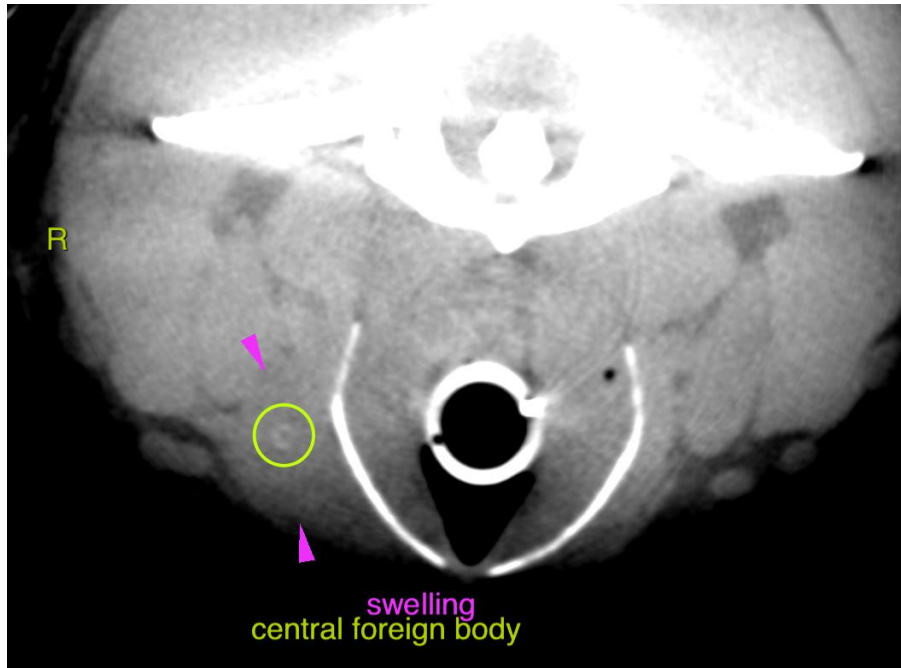
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

Canine

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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