



**PATIENT PRESENTING CLINICAL SIGNS**

**Tilly Lemley** History: O brought in Tilly for a mass that has been growing on the face since march. O says the mass does not seem to cause any pain. O said back in march it was very small but this month it has grown rapidly. O says it does not seem to affect Tilly eye sight. O says Tilly is still E/D/U/D normally. O says Tilly is acting like nothing is happening. Tilly was seen at her primary a while back and the vet told them they needed to see a specialist to have it removed.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: Low- RBC, HCT HCB, MCV, MCH, LYm High- MPV, crea, bun. Alkp

**BREED**

Old English Sheepdog

**COMPUTED TOMOGRAPHIC STUDY OF THE SKULL**

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

**SEX**

Spayed Female

**COMPUTED TOMOGRAPHIC FINDINGS**

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

**AGE**

7 Years

Originating from the right zygomatic arch, an expansile, circumferential, amorphous mineralizing mass is seen, involving the entire length of the right zygomatic arch – from the maxillary bone up to the zygomatic process of the left temporal bone – is appreciated. The right zygomatic arch presents advanced permeative osteolytic lesions. In the medial aspect the mass is in contact with the ramus of the right mandible and protruding into the right orbital cavity. The right ocular bulb is deviated rostradorsally.

**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.

**HOSPITAL NAME**

Neel VH

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.

**REFERRING VET**

Dr. Ellen Domnick

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.

The right parotid lymph node is prominent and rounded.

**INVOICE**

23702

The right submandibular and medial retropharyngeal lymph nodes are mildly enlarged.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**DATE**

7/28/23



**PATIENT**

Tilly Lemley

- Polyostotic aggressive osteoproliferative mass originating from the right zygomatic arch
- Secondary right sided exophthalmos
- Lymphadenopathy right parotid lymph node, right mandibular lymph nodes and right medial retropharyngeal lymph node

**SPECIES**

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The mineralizing mass originating from the right zygomatic arch is consistent with primary osseous neoplasia – such as osteochondrosaroma, osteosarcoma, chondrosaroma. Biopsy of the mass might be performed for further differentiation. The prominent tributary lymph nodes are concerning for metastatic spread – recommend FNA sampling for further workup. Complete surgical resection of the mass will warrant aggressive surgical technique, resecting the right zygomatic arch – including parts of the mandibular fossa of the right temporomandibular joint and caudal hemimaxillectomy. Consider full tumor staging.

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**PATIENT**

Tilly Lemley

**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  
info@sonopath.com

**BREED**

Old English  
Sheepdog

**SEX**

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**AGE**

7 Years

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