



**PATIENT**

Rizzo Montalbano

**PRESENTING CLINICAL SIGNS**

Patient presented to urgent care for hyporexia and suspected oral pain of 5d duration. Owner stated pet suddenly stopped eating any hard food and was very tentative eating hard kibble, and seemed painful in the mouth, particularly on the L side. Oral exam under anesthesia revealed difficulty opening the jaw, even when sedated, and a "popping" when jaw did open. No muscle atrophy was noted. No visible masses, FB or fractured teeth were noted. Concern for TMJ pathology vs masticatory myositis.  
Abnormal PE/Chem/CBC/UA Results: Pre-op Chem 17, CBC, Lytes all WNL

**SPECIES**

Canine

**BREED**

French Bulldog

**COMPUTED TOMOGRAPHY OF THE SKULL**

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

**COMPUTED TOMOGRAPHIC FINDINGS**

**SEX**

MN

The tooth elements 305, 306, 311, 405, and 411 are absent. Triadan 304&404 are incompletely erupted and major parts are retained within the alveolar crest. Triadan 310 and 410 present a mild periapical widening of the periodontal space.

**AGE**

3 Years, 5 Months

The masticatory musculature is uniform soft tissue attenuating and contrast enhancing.

In both nasal cavities, a mild amount of fluid attenuating material is attached to the nasal mucosal lining. The soft palate is moderately elongated and thickened.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The mandibular fossa of the zygomatic process of the temporal bone bilaterally and the respective retroarticular process bilaterally are shallow. The condylar process of the mandible bilaterally is in situ.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth. The external ear canals are within normal limits.

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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 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.

**REFERRING VET**

Dr. Laura Baumert

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Dysplasia temporomandibular joints bilaterally
- Elongated and thickened soft palate
- Mild rhinitis
- Periapical granuloma formation 310&410
- Incomplete eruption of triadan 304&404
- Multiple absent teeth

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The dysplasia of the temporomandibular joint might be a predisposing factor for luxation or degenerative joint disease of the TMJ's but is commonly an incidental finding.

No abnormalities of the masticatory musculature are appreciated, however in case of suspicion



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for masticatory muscle myositis, recommend complementing workup by M2 muscle fiber antibodies ± muscle biopsy.

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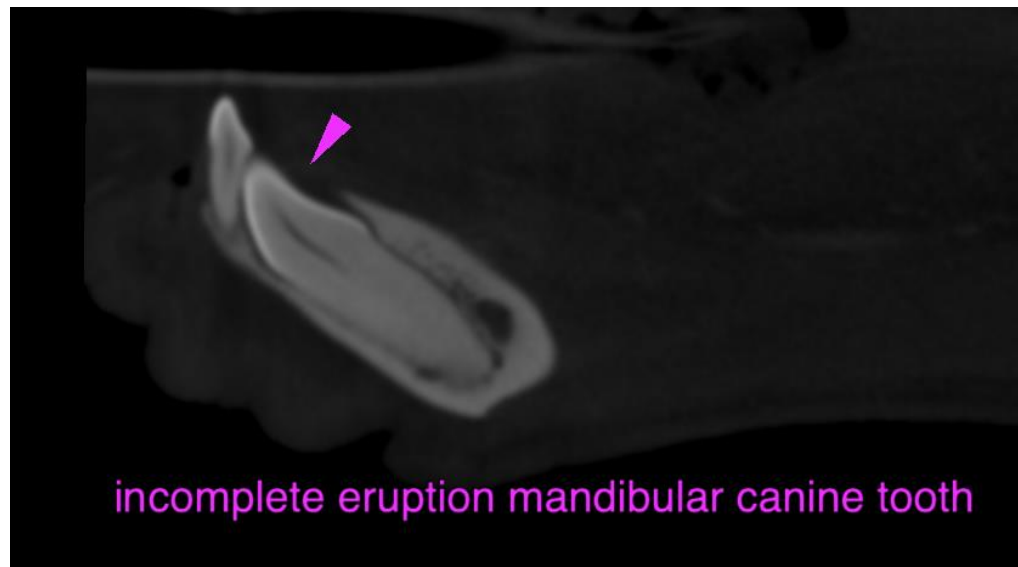
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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