



PATIENT PRESENTING CLINICAL SIGNS

Rosie 2256KE History: 48 hours prior reported as normal - 24 hours prior acute respiratory distress took owner to RDVM with radiograph showing changes of the caudal pharynx (images included). With concerns of intra-luminal mass vs foreign material, sedated for airway endoscopy - no identified mass but suspect ulcer noted - cytology pending. Moved to CT with contrast - study submitted.

SPECIES

Canine Abnormal PE/Chem/CBC/UA Results: CHEM/CBC with mild neutrophillia -- no other changes

BREED

Poodle

COMPUTED TOMOGRAPHIC STUDY OF THE NECK

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

COMPUTED TOMOGRAPHIC FINDINGS

SEX

Spayed Female

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

AGE

9 Years

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.

INTERPRETED BY

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

The larynx presents an intramural homogeneous soft tissue swelling – affecting the arythenoid cartilage, accentuated in the right and dorsal aspect, crossing the midline up to the left arythenoid cartilage – with a heterogeneous contrast enhancement pattern is appreciated.

The medial retropharyngeal lymph nodes are prominent.

HOSPITAL NAME

Gentle Doctor AH

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Intramural laryngeal soft tissue swelling, R>L, centered on the arythenoid cartilages
- Lymphadenopathy medial retropharyngeal lymph nodes

REFERRING VET

Pete Bashara, DVM

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

An intramural swelling of the mucosal lining of the larynx is appreciated, the finding is not specific and can be inflammatory – e.g. allergic reaction, insect bite, eosinophilic granuloma – with edematous swelling, upper airway obstruction with secondary laryngeal edema, or neoplastic (e.g. squamous cell carcinoma, lymphosarcoma, melanoma). Consider cyto-brush for cytological examination.

INVOICE

23995

Recommend complementing workup by FNA sampling of the medial retropharyngeal lymph nodes as well.

DATE

8/18/23



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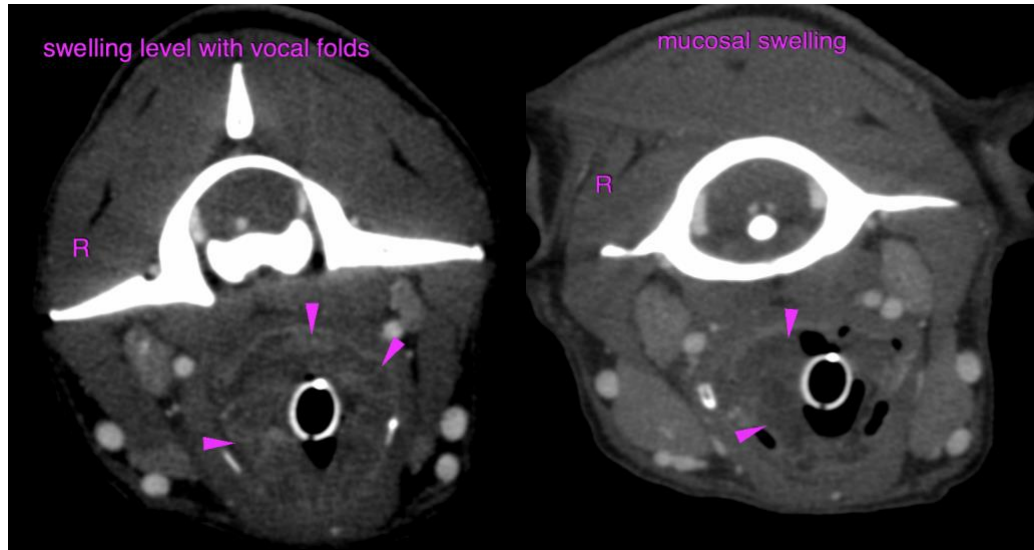
Pete Bashara, DVM

INVOICE

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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.

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