



PATIENT

Sonny Gruson

PRESENTING CLINICAL SIGNS

Several month history of stridorous breathing. Not linked to exercise or excitement reliably. Laryngeal paralysis noted on airway examination and bloodwork diagnosed hypothyroid. Searching for other explanations for stridorous breathing.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: BW consistent with hypothyroidism Mild elevation ALP and cholesterol.

BREED

Cocker Spaniel

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

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

COMPUTED TOMOGRAPHIC FINDINGS

SEX

MN

Skull

The tooth elements 101-103, 105, 109, 110, 201, 203, 210, 301, 309, 310, 311, 401, 408-411 are absent.

AGE

13 Years

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

HOSPITAL NAME

Animal Health
Partners

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 Shannon
Westgarth

The osseous and soft tissue structures of the neck are within normal limits, but mild mineralizations of the intervertebral discs of the cervical spine.

Thorax

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The body condition score is 7/9.

Both shoulder joints show moderate osteophyte new bone formation.

DATE

8-19-21

Multiple variable sized lipomas are seen in the subcutaneous tissue of the thoracic wall and axillary region bilaterally.

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The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5 , the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

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

SPECIES

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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.

BREED

Cocker Spaniel

The lung parenchyma presents the expected architecture and attenuation behavior with interspersed punctuate mineralizations.

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

SEX

MN

The pictured parts of the liver present multiple pre- and post- contrast variable sized roundish parenchymal filling defects, measuring up to 9 mm in size.

COMPUTED TOMOGRAPHIC DIAGNOSIS**AGE**

13 Years

- Obesity
- Multiple absent teeth
- Suspect multiple hepatic cysts
- Pulmonary osteomas
- Mild chondroid disc degeneration cervical spine
- Degenerative osteoarthritis shoulder joints bilaterally

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**HOSPITAL NAME**

Animal Health
Partners

The CT study presents without macromorphological abnormalities explaining the history of upper airway stridor and given the clinical findings, the laryngeal paralysis appears as a plausible explanation.

REFERRING VET

Dr Shannon
Westgarth

The hepatic lesions are most consistent with hepatic cysts. Ultrasound can be used to confirm the diagnosis and will allow FNA sampling if findings are inconclusive.

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SPECIES

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SEX

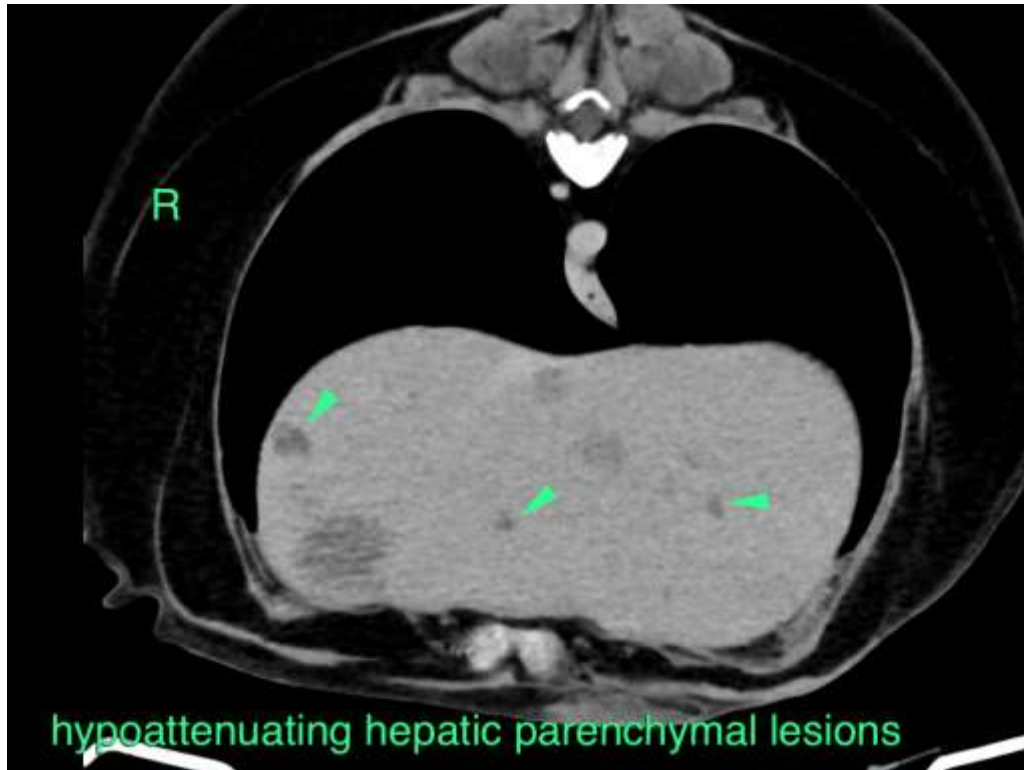
MN

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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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