



**PATIENT PRESENTING CLINICAL SIGNS**

Tuna West History: \*DVM pet. Severe and progressive reverse sneezing.

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC STUDY OF THE SKULL**

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

**BREED**

Jack Russell

**COMPUTED TOMOGRAPHIC FINDINGS**

The tooth element 208 is absent.

**SEX**

Spayed Female

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

**AGE**

10 Years

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.

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

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 left submandibular and medial retropharyngeal lymph node are prominent and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

**HOSPITAL NAME**

Mobile Pet Imaging

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Mild lymphadenopathy left mandibular and medial retropharyngeal lymph nodes
- Absent triadan 208
- Normal upper airways

**REFERRING VET**

Meaux

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INVOICE**

13351

The current CT study of the skull is negative for clinical relevant disease, the upper airways are aerated and no abnormalities are appreciated. Complementing workup by rhinoscopy including biopsy to rule out non-specific rhinitis or nasal mites can be considered as an advanced diagnostic test.

**DATE**

9/29/21



**PATIENT**

The mild prominent left mandibular and medial retropharyngeal lymph node are compatible with reactive hyperplasia.

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**REFERRING VET**

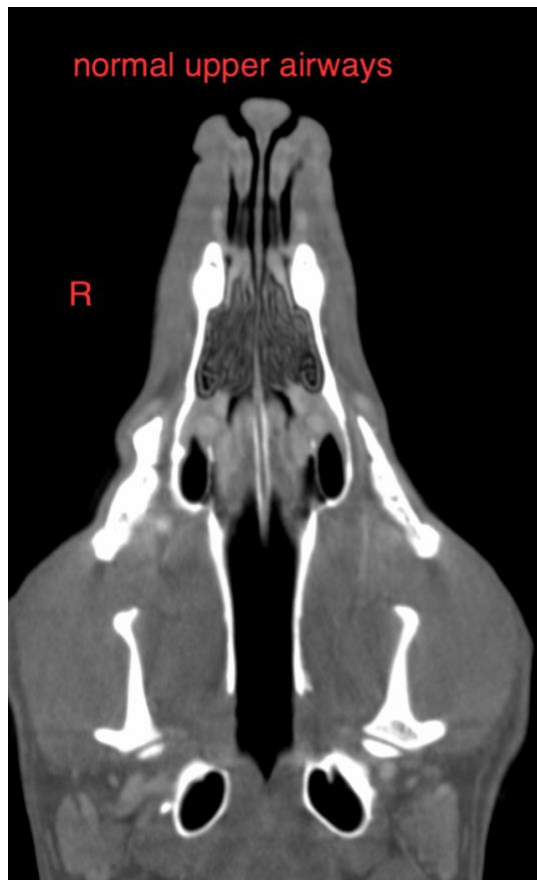
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**The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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.

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
sebast.schaub@gmail.com



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