


PATIENT PRESENTING CLINICAL SIGNS

Bella Proffitt Pet presented to ER on 4/15/23 after fighting with a Porcupine. Numerous quills were surgically removed from the head and mouth. Since then, several quills have worked their way to the surface that owner has removed at home. Pet now has numerous small flocculent swellings over the head and lips.

SPECIES After the CT, 7 additional quill fragments were removed, 4 on the R side of the head, one on the L and 2 from the lips. Several of the swellings were explored and tracts that appeared to dive deep into the musculature were found, but quills were not definitively ID'ed.

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

BREED A high-resolution pre- and post-contrast CT study of the head are provided for review. Totalizing two series. One pre-contrast series and one post-contrast series.

Mastiff

COMPUTED TOMOGRAPHIC FINDINGS

SEX A very thin, with or without a slightly hyperattenuating border, and with or without more hyperattenuating extremity focus, foreign materials are seen in the upper lips adjacently to the nostrils, lower lips, inferior labial regions, adjacently to the subcutis and muscle regions, bilaterally. They are also seen adjacently in the temporal, palpebral, and periorbital regions.

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AGE In some regions, only a pinpoint hyperattenuating focus is identified, and these are more difficult to determine as foreign material or focus of dystrophic mineralization points. The following are the suspected regions for tiny retained foreign materials:

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- Located at the right upper lips, labial region (1)
- Located at the left upper, labial region, as a reference, the triadans 201 and 202 (2)
- Located at the left upper, labial region, as a reference, the triadans 201 and 202 (3)
- Located in the left lower labial region. (4)
- Located soft tissue right side border, intraoral or not, as referenced in the Triadan 402. (5)
- Located soft tissue, left side, upper lip, as referenced in Triadan 205. (6)
- Located at the soft tissue and subcutis, right side, as reference the palpebral area. (7)
- Located at the soft tissue and subcutis, left side, as reference the palpebral area. (8)
- Located at the soft tissue and subcutis, right side, as reference the infra-orbital region. (9)
- Located at the soft tissue and subcutis, left side, as reference the infra-orbital region versus intraoral. (10)
- Pinpoint mineral focus, suspected lesion, soft tissue and muscle, right side dorsal orbital wall, and reference *levator palpebral superioris muscle*. (11)
- Suspected lesion, adjacently in the soft tissue, palpebral, and periorbital regions, bilaterally. (12)
- Pinpoint mineral focus, suspected lesion, left side, at the soft tissue and subcutis, as referenced by the temporal fascia and pina. (13)
- Pinpoint mineral focus, a suspected lesion, at the soft tissue and subcutis, as well as the temporal fascia and pina, on the right side. (14)

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INVOICE A soft tissue swelling is seen adjacently to the nostril, lower and upper lips.

58212 The nasal cavity, choana, nasopharynx, and larynx are normal.

The cribriform plate is intact.

DATE

5-9-23



PATIENT The frontal sinuses are rudimentary, incidental.

Bella Proffitt The tympanic bullae and external auditory canals are normal.

SPECIES The medial retropharyngeal lymph nodes and mandibular lymph nodes are mildly enlarged, homogeneous attenuation.

Canine No mass effect is seen in the brain.

The temporomandibular joints are bilaterally congruent.

BREED **COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Mastiff
- Multiple suspected, thin, linear, or punctual foreign material, with the characteristics of quills. In few points, a soft tissue edema and inflammation tract is more evident adjacently.
 - Soft tissue subcutis, edema, swelling and inflammation adjacent to the nostril, lips, and periorbital regions, bilaterally.

SEX

FA **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATION**

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Multiple thin, linear, or punctual foreign materials with the characteristics of quills are suspected to have been identified, and they are correlated to the patient's history. At least 14 tiny areas of foreign material in the face, adjacently in the oral, intraoral, and periorbital areas are apparently identified. However, because of the characteristics of this specific foreign material, which are not always clearly defined, and a specific computed tomographic artifact called streak, there is more difficulty to confirm all suspected regions cited, because the streak artifact can mimic this specific foreign material. A careful evaluation, palpation, and soft tissue ultrasound examination with a high-frequency transducer is recommended in these specific cited regions for identification and confirmation; as well as the ultrasound could be a very useful tool to help localize during the extraction. For a small radiolucent or mildly opaque foreign material, a multimodal approach is usually necessary.

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After extraction with ultrasound guidance, if there is a persistent increase in volume in some regions or in the periorbital and retrobulbar region, an MRI could be necessary.

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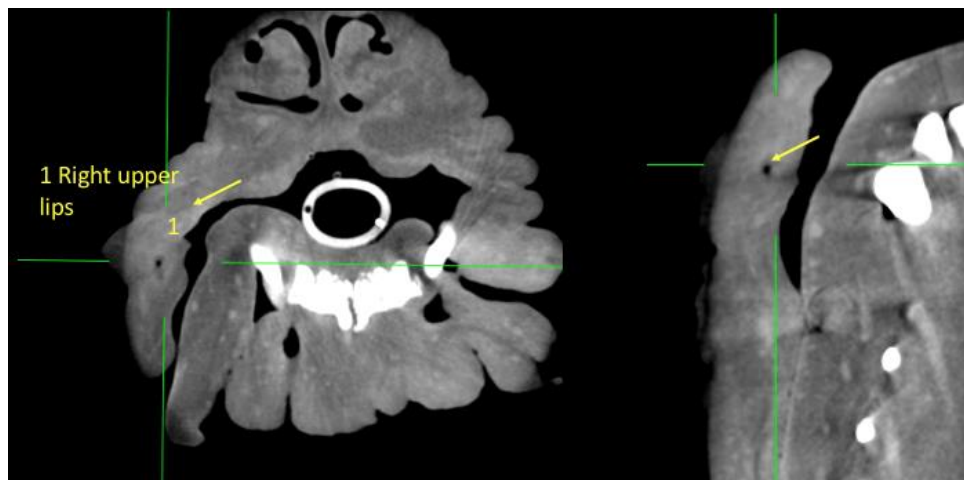
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PATIENT

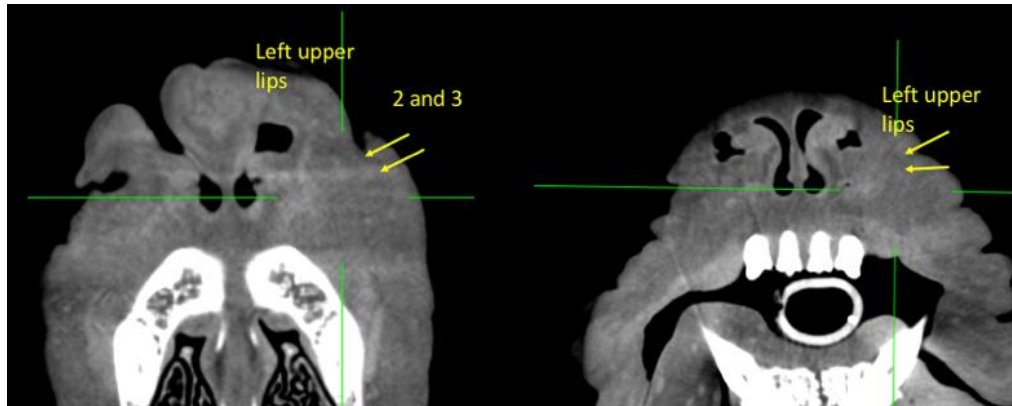
Bella Proffitt

SPECIES

Canine

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Mastiff



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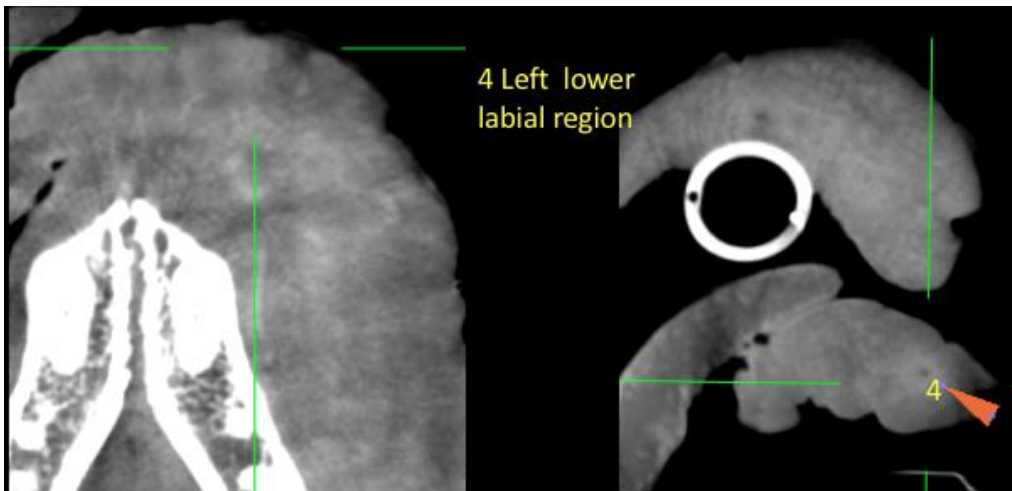
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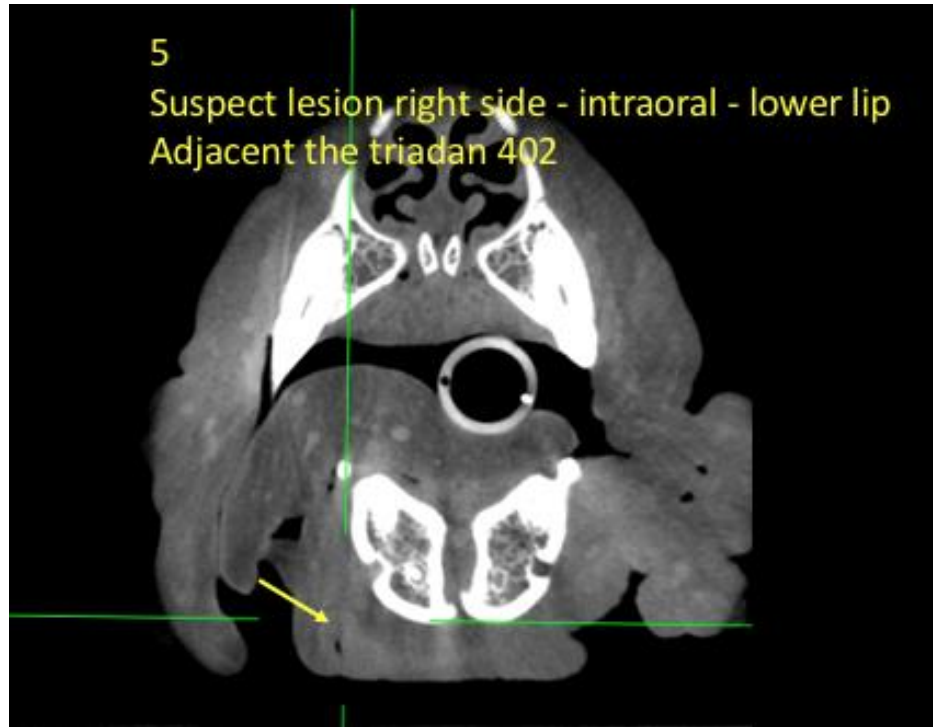
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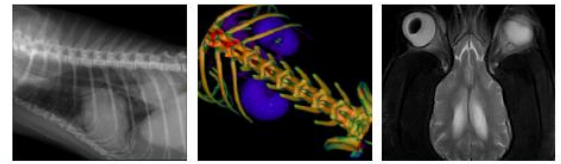
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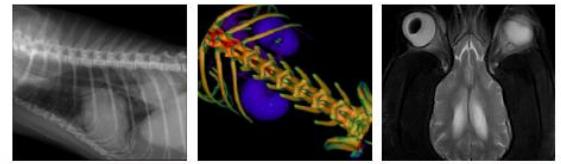
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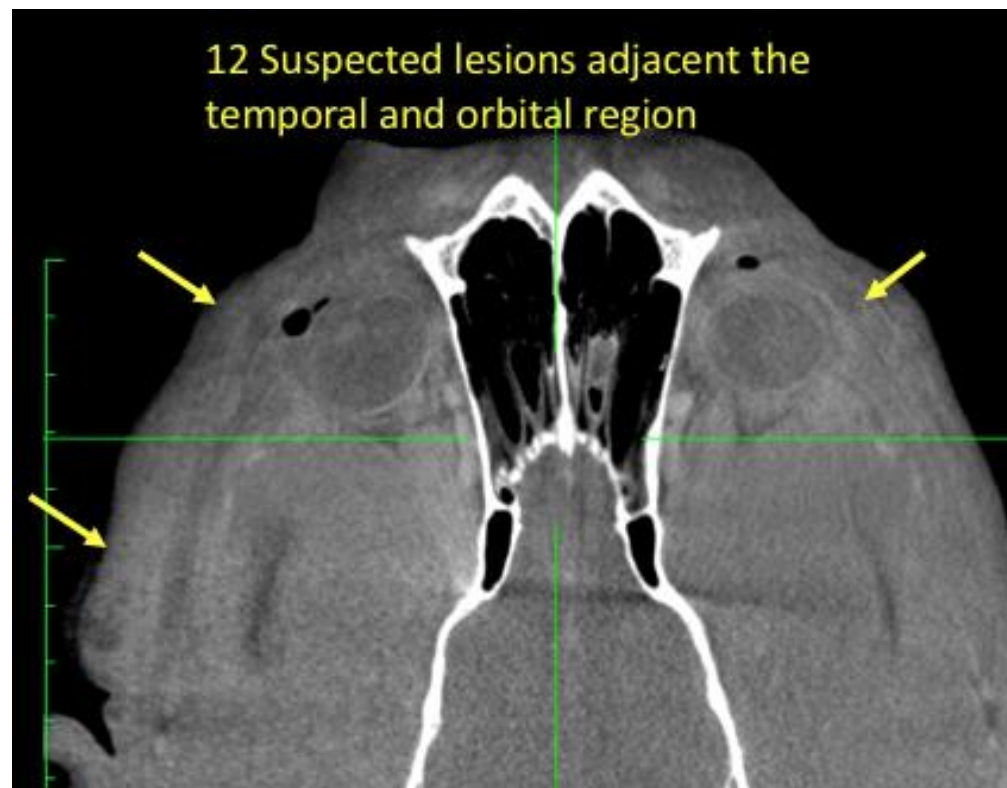
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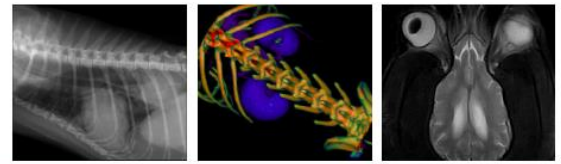


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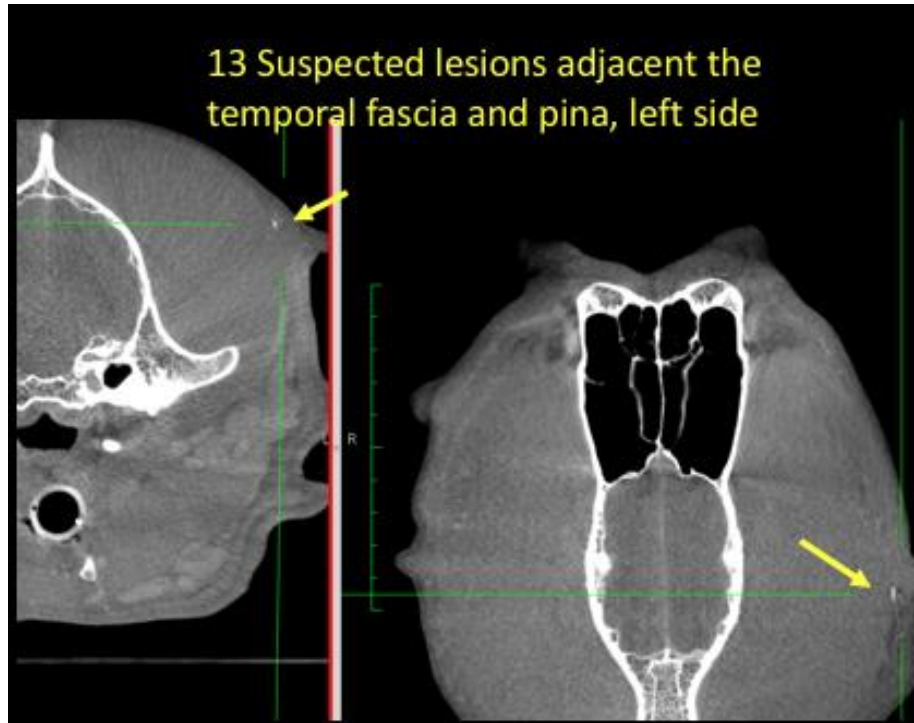
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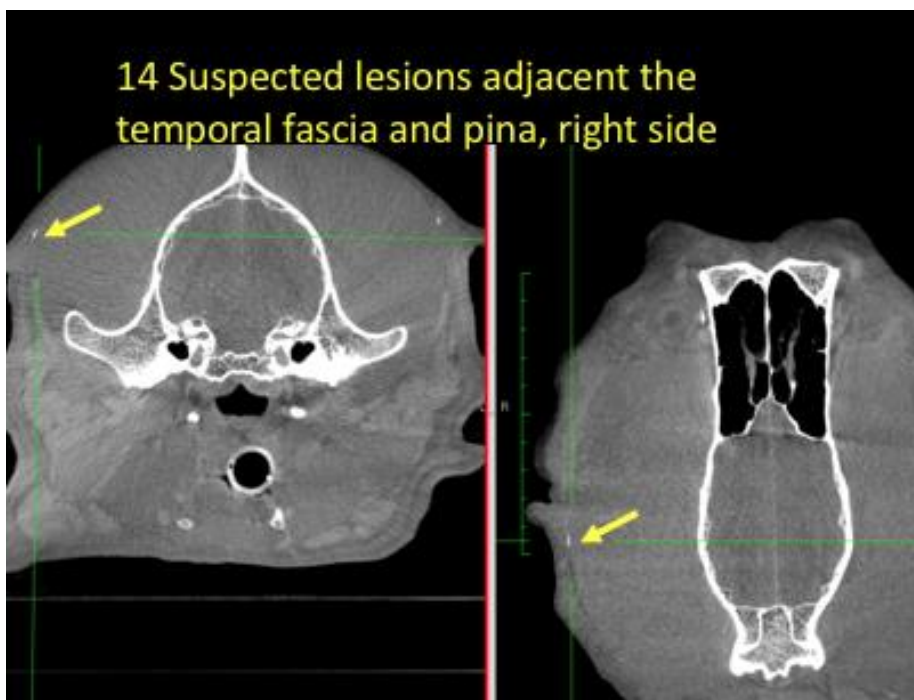
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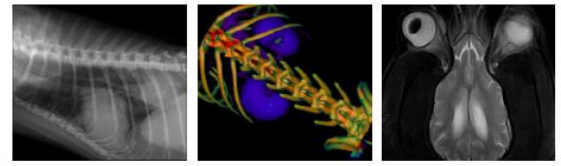
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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