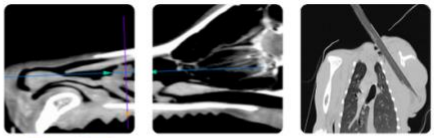

PATIENT

Simon Ramos

SPECIES

Canine

BREED

Mix

SEX

Neutered Male

AGE

8 Years

WEIGHT

31 Pounds

INTERPRETED BY

Heike Rudorf, DVM, Dr. med. Vet., DipECVDI DVR

IMAGING PERFORMED BY

Carmen

HOSPITAL NAME

Animal Clinic of Queens

REFERRING VET

Dr. Mucera

INVOICE

36015

DATE

2/27/26

PRESENTING CLINICAL SIGNS

Patient presented with a sudden loss of mobility lasting approximately 6 minutes.

At the consultation, all signs were normal, and the patient appears mentally alert and well.

The owner reports that since an early age, the dog has experienced occasional localized muscle contractions in the upper part of the head. However, this is the first episode in which the dog lost control of its body in this manner.

It is unclear whether these muscle contractions are related to the dog's early life, as it was found on the street and may have had poor living conditions.

RADIOGRAPHS OF THORAX, ABDOMEN AND HEAD

The body condition score is 7-8/9 with smooth, alternating layers of fat and soft tissue opacity.

The bony structures are within normal limits.

Thorax

The cranial mediastinum is of physiological size and opacity. The trachea diverges from the thoracic vertebrae, and the carina is located level with T5.

The degree of pulmonary expansion is good. The lung lobes extend to the thoracic boundaries. Pulmonary vessels are visible

The cardiac silhouette occupies 75% of the chest height and 3 intercostal spaces. Chamber or outflow tract enlargement is not obvious.

Abdomen

The abdominal organs are surrounded by fat; diaphragm and abdominal wall are intact.

The liver is located within the costal arch and the caudo-ventral lobe is pointed.

The spleen appears physiological.

The stomach is moderately distended with food. The small intestinal loops are best seen in the caudo-ventral abdomen due to the ingesta-like contents surrounded by gas. In the cranial abdomen their edges are blurred. The desc colon is located in the ventral abdomen and contains gas. Feces is located in the terminal colon which extends dorsally to reach its physiological position cranial to the pelvic canal.

The left renal shadow has a physiological size, shape and opacity; the right is obscured by intestinal loops. The bladder is moderately full and the bladder neck is located cranial to the pubic brim.

The prostate is located cranial to the pubic brim.

The sublumbar region appears physiological.

Head & Neck

The C4-6 disc spaces are reduced and a bone spur appears to be located ventral to C5.

The bony surfaces of the skull are smooth. No evidence of osseous destruction or lysis is obvious. The highlighted teeth appear physiological. The soft tissue at the mandibular incisor teeth and in the region of the globe appears prominent and sand-like.

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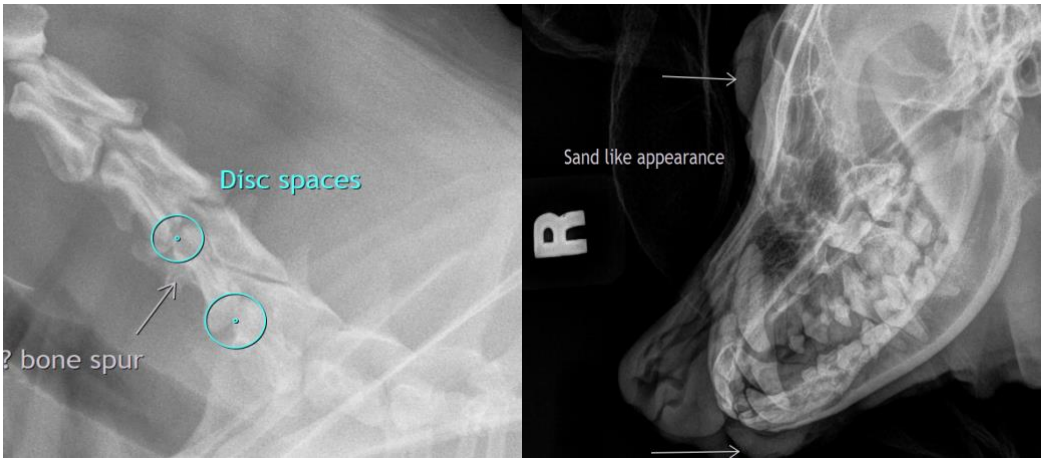
RADIOGRAPHIC DIAGNOSIS

- Reduced disc spaces C4-6
- Possible new bone ventral C5
- Localized, sand like soft tissue appearance

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes are equivocal and but neurological signs relating to the C-spine are present, a Ct examination is recommended to rule out disc disease. The sand like appearance of the soft tissues can be assessed visually and manually for their significance. Depending on the severity and frequency of the clinical signs, a brain tumor should be ruled out with MRI before a diagnosis of idiopathic epilepsy is made.



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.

Heike Rudorf, DVM, Dr. med. vet., DipECVDI, DVR
info@sonopath.com