

**PATIENT**

Phoenix Emery

SPECIES

Feline

BREED

Domestic Longhair

SEX

Neutered Male

AGE

7 Years

INTERPRETED BYNele Eley, DVM
Dr. med. Vet. DipECVDI**HOSPITAL NAME**Adelaide Plains
Veterinary Surgery**REFERRING VET**

John Katakasi

INVOICE

49709

DATE

1-19-22

PRESENTING CLINICAL SIGNS

Odd gait approx 1 week ago in HLs was seen by Greencross Vets on 13/01 and suspect MCSK. Present to SASH vets over the weekend due to progression on symptoms in HLs ataxia and suspected neurological ddx. EDUF wnl but owner has to take him to litter box and hold him. The most he has walk is yeasterday morning for a few minutes around house , otherwise recumbent. Current Med - metacam oral SID gabapentin half cap SID (unsure mg)
Abnormal PE/Chem/CBC/UA Results: Toxoplasma Blood results pending

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies available for review.

COMPUTED TOMOGRAPHIC FINDINGS

The left tympanic bulla contains a moderate amount of fluid attenuating contrast negative material with a meniscus sign. The osseous lining of the tympanic bulla appears to be mildly thickened. There appears to be increased contrast enhancement level with the adjacent meninges, however, beam hardening streak artifacts superimposed onto this area. The external auditory meatuses present within normal limits. The right tympanic bulla presents within normal limits.

Nasopharyngeal soft tissue swelling is seen adjacent to the left tympanic bulla.

No evidence of structural brain pathology is seen.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Left sided otitis media with potential for intracranial extension.
- Secondary ipsilateral nasopharyngitis.
- No structural evidence of brain pathology.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals left sided otitis media which may be associated with the clinical signs of the patient. Early intracranial extension cannot be ruled out; however, the region is prone to beam hardening artifacts and definitive meningeal thickening and increased enhancement cannot be ascertained.



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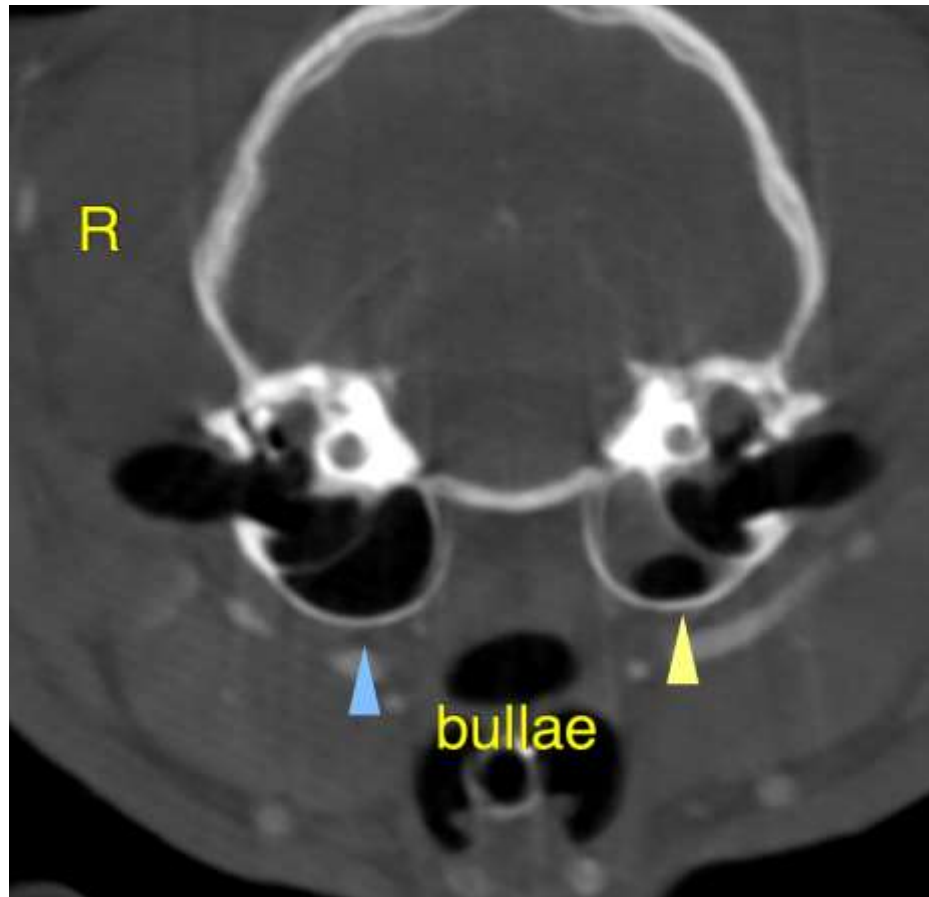
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley, DVM, Dr. med. vet., DipECVDI
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