



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Shadow Yu
 Previously diagnosed with seizures. He was whining a lot but this is improving. He is sedate from meds. He eats well when not sedate. He turns to the left when sedated. His right eye looks abnormal. He will stick his head in corners. He is pacing.

SPECIES Abnormal PE/Chem/CBC/UA Results: Mentation: Disoriented, disconnected Cranial nerve exam: Absent menace response OU Gait/posture: Ambulatory with compulsive pacing and circling to the left. Gets stuck in corners. Has tetraparesis, worse on the right with occasional spontaneous knuckling in the right thoracic limb. Postural reactions: Proprioceptive positioning is delayed in the right thoracic and right pelvic limbs and normal in the left thoracic and left pelvic limbs.
SPECIES Canine
BREED

Alaskan Malamute

MAGNETIC RESONANCE IMAGING FINDINGS

Brain

SEX

A large irregular shaped extraaxial mass is seen level with the left cerebral frontal and temporal lobes. The mass measures approximately 3.0 cm in length, 2.5 cm in width, and 2.0 cm in height. A severe mass effect is seen pushing the left cerebral hemisphere medially and caudally. Midline shift of the cerebral falx is seen. The mass is heterogeneously isointense on T2-weighted images. Extensive white matter edema is seen within the left cerebral hemisphere on the T2-weighted and FLAIR images. Foci of signal void are seen on the T2 star weighted study. Mild hypointensity is noted on the T1-weighted plain studies. Strong and largely uniform contrast enhancement with long dural tails is present on the contrast enhanced images. There is bilateral lateral ventricular dilation. The 3rd and 4th ventricle are compressed. There is caudal displacement of the cerebrum with mild foraminal herniation.

MN

AGE

8 Years

INTERPRETED BY

Nele Eley, DVM
 Dr. med. Vet. DipECVDF

MAGNETIC RESONANCE IMAGING DIAGNOSIS

- Left sided extraaxial intracranial mass level with the frontal and temporal lobes with dural tails, severe mass effect, and perilesional edema, as well as obstructive hydrocephalus and increased intracranial pressure with cerebellar herniation.

HOSPITAL NAME

Animal Health Partners

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The MRI findings are compatible with a large meningioma level with left frontal and temporal lobes. The mass effect and perilesional edema are severe. There is evidence of increased intracranial pressure as per the obstructive hydrocephalus and cerebellar herniation. Theoretically, round cell neoplasia is a differential diagnosis; however, this should be considered meningioma until proven otherwise. Meningiomas are typically benign even though aggressive biological behavior and infiltrative growth can occur. The mass here is principally in a resectable position. It has to be noted though that the recurrence rate after surgical excision of meningioma is higher in dogs when compared with cats.

REFERRING VET

Dr. Kilburn

INVOICE

49704

DATE

1-19-22



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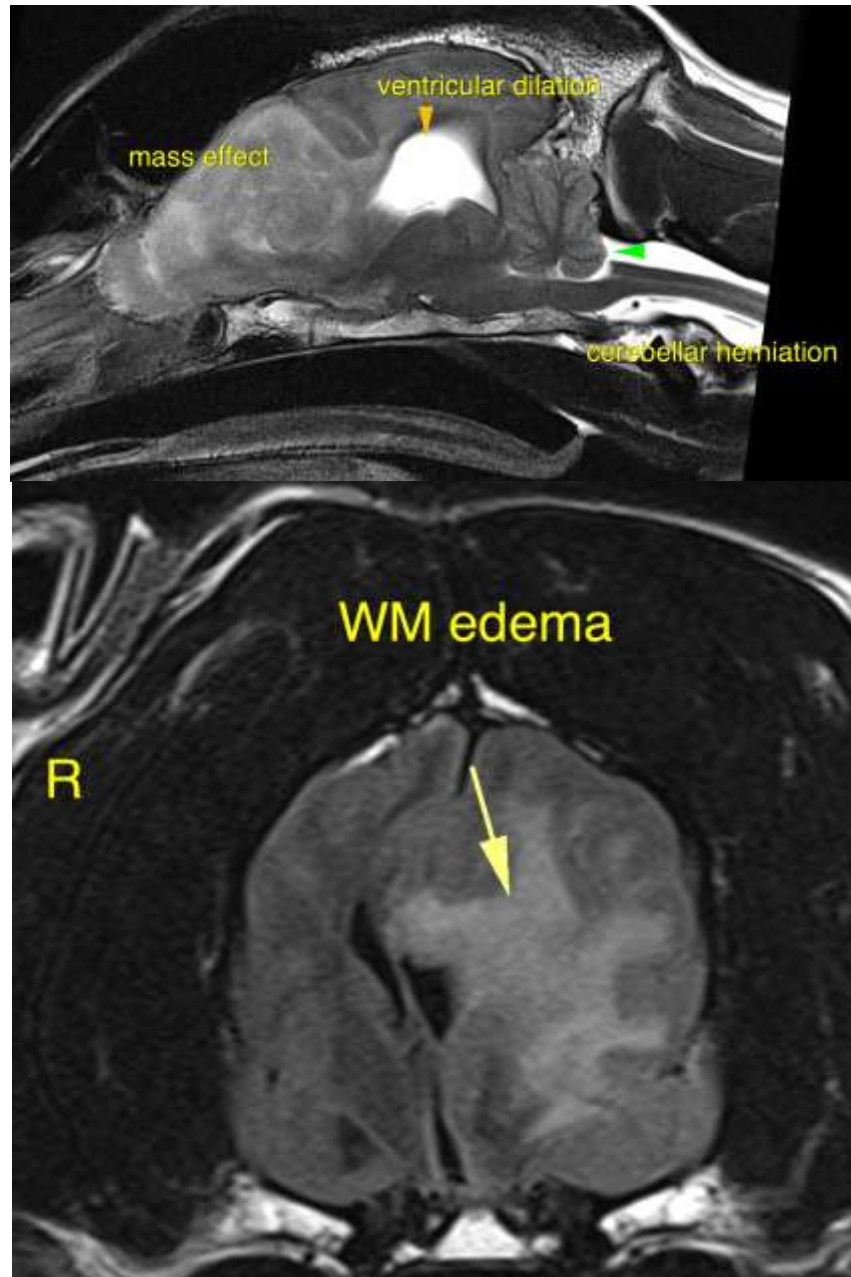
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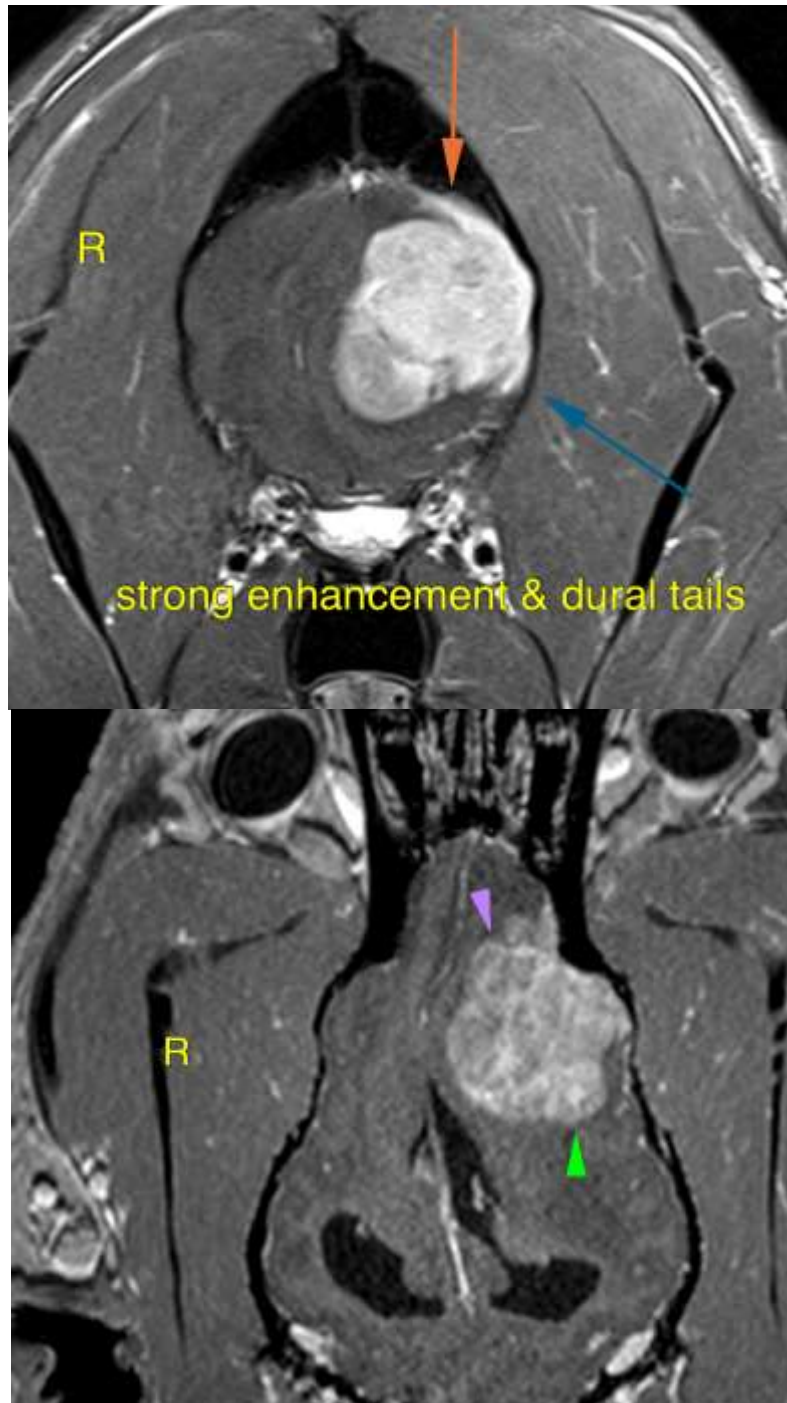
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Shadow Yu

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.

SPECIES

Canine

Nele Eley, DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
Nele.Eley@sonopath.com

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