



**PATIENT PRESENTING CLINICAL SIGNS**

**Ella Lindsay**  
**SPECIES** Dog  
**BREED** Kelpie  
**SEX** Female  
**AGE** 11

Hx: loss of hearing 1 month ago, presented to sash sydney for advanced imaging but deemed old age changes only and discharged with no diagnostics performed. Sudden onset RHS circling and severe head tilt 24 hrs ago. Seen by crookwell vet. No nystagmus, no twitching, convulsinf or other seizure activity. Given diazepam and phenobarbitone inj and discharged on 5mg/kg phenobabitone po bid, last dose was 1.5 hrs ago. Dog presented markedly ataxic, altered mentation, bumping into walls, doesnt seem to be fully present mentally. No head tilt or circling evident today.

**COMPUTED TOMOGRAPHIC STUDY OF THE HEAD, THORAX, & ABDOMEN**

Plain and post contrast studies in soft tissue, lung, and bone windows available for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

**Head**

The brain presents no deviation from normal anatomy and symmetry. The grey and white matter distinction and the neuroparenchymal attenuation are as expected. The distribution of contrast enhancement is within normal limits throughout the parenchyma and meninges. The ventricular system is non-dilated and within the limits of the expected volume and symmetry.

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 auditory meatuses present within normal limits.

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

The salivary glands present within normal limits.

**Thorax**

The bony and surrounding soft tissue structures are within normal limits.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern are uniform and considered within normal limits.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior.

**INTERPRETED BY**

Nele Eley, DVM  
 Dr. med. Vet. DipECVDI

**HOSPITAL NAME**

Advanced Veterinary  
 Imaging

**REFERRING VET**

Dr. McLeod

**INVOICE**

55036

**DATE**

11-6-22



**PATIENT**

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

Ella Lindsay

**Abdomen**

**SPECIES**

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

Dog

**BREED**

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

Kelpie

The adrenal glands are within normal limits for size, shape and organ architecture.

**SEX**

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

Female

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

**AGE**

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

11

Mild degenerative lumbosacral stenosis is noted.

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**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Normal CT findings of the brain, middle, and inner ear.
- Mild degenerative lumbosacral stenosis.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT study does not reveal structural pathology of the brain, middle, or inner ear. The negative CT findings appear to render idiopathic vestibular syndrome a potential differential diagnosis. Complementary csf analysis could be considered in order to rule out inflammatory/infectious, degenerative, metabolic/toxic, or other brain pathology along with full internal medicine workup.

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No significant thoracic and abdominal changes were noted.

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There is mild degenerative lumbosacral stenosis. Clinical correlation is required since the significance of the changes at the lumbosacral junction is highly variable.

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**PATIENT**

Ella Lindsay

**SPECIES**

Dog

**BREED**

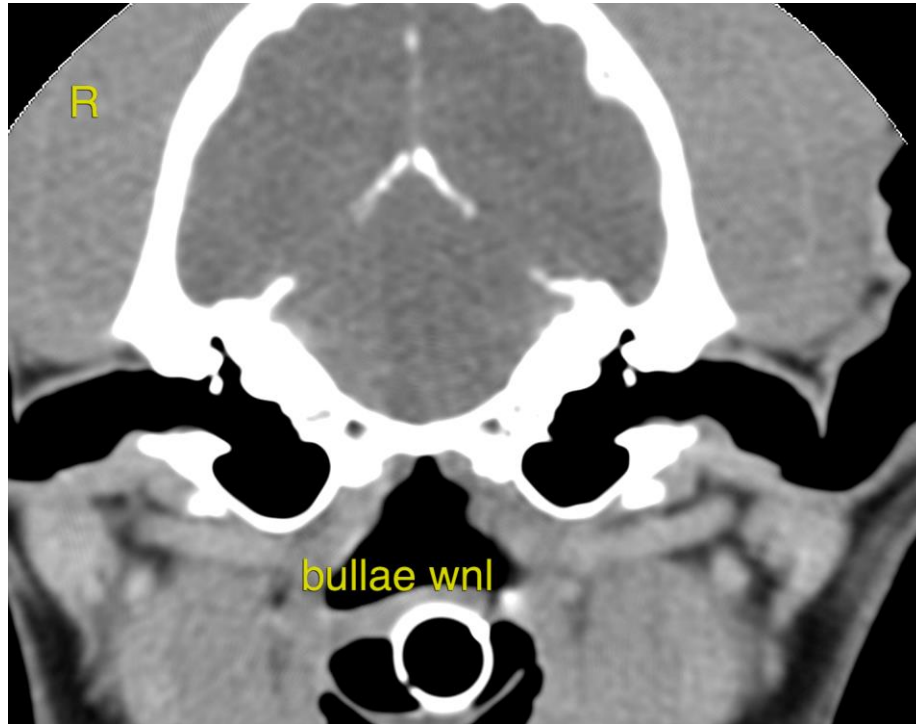
Kelpie

**SEX**

Female

**AGE**

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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.

**HOSPITAL NAME**

Advanced Veterinary  
Imaging

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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