



PATIENT

Wisky Cruz

PRESENTING CLINICAL SIGNS

Patient came to the clinic for evaluation of possible seizures/stroke.
Abnormal PE/Chem/CBC/UA Results: CBC --- mild thrombocytosis CHEM --- unremarkable

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies available for review.

BREED

Yorkshire Terrier

COMPUTED TOMOGRAPHIC FINDINGS

There is no evidence of neuroparenchymal abnormality. Bilaterally symmetric moderate lateral ventriculomegaly of the brain is noted. There is also moderate ventriculomegaly of the third ventricle.

SEX

M

Brachycephalic craniocervical stenosis is noted. There is no evidence of pathologic contrast enhancement.

AGE

16 Years

The dentition is incomplete. Both mandibles are shifted towards the right side which may be a function of the intubation and positioning. The remaining teeth present the most severe periodontal disease with multiple resorptive lesions and dental plaques as well as dentonasal fistulae of the triadans 104, 204, and emerging fistulae of the remainder of the left maxillary molar teeth.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The temporomandibular joints present within normal limits.

Mild bilateral nondestructive rhinitis is noted.

There is a 3.0 x 1.5 cm sized fluid filled cavitory lesion with thin peripheral rim enhancement medial of the right mandibular salivary gland with retropharyngeal extension.

HOSPITAL NAME

Veterinary Image
Center

The submandibular lymph nodes present mild enlargement on both sides.

A mild amount of hypoattenuating contrast negative material is seen within the medial aspect of both external auditory meatuses.

REFERRING VET

Dr. Y. Martinez, DVM

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Ventriculomegaly of the brain - no evidence of structural brain injury identified.
- Bilateral otitis externa.
- Sialocele of the right mandibular salivary gland.
- Incomplete dentition, malocclusion, severe periodontal disease with emerging dentonasal fistula formation and secondary bilateral nondestructive rhinitis.

INVOICE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

12-20-21

The CT study reveals no structural evidence of brain injury. Late onset epilepsy is a potential differential diagnosis ; however, neurodegenerative disease, metabolic/toxic, and inflammatory/infectious pathology cannot be ruled out as well as cerebrovascular disease as potential causes of the seizural activity. Complementary csf analysis could be considered if not performed already.



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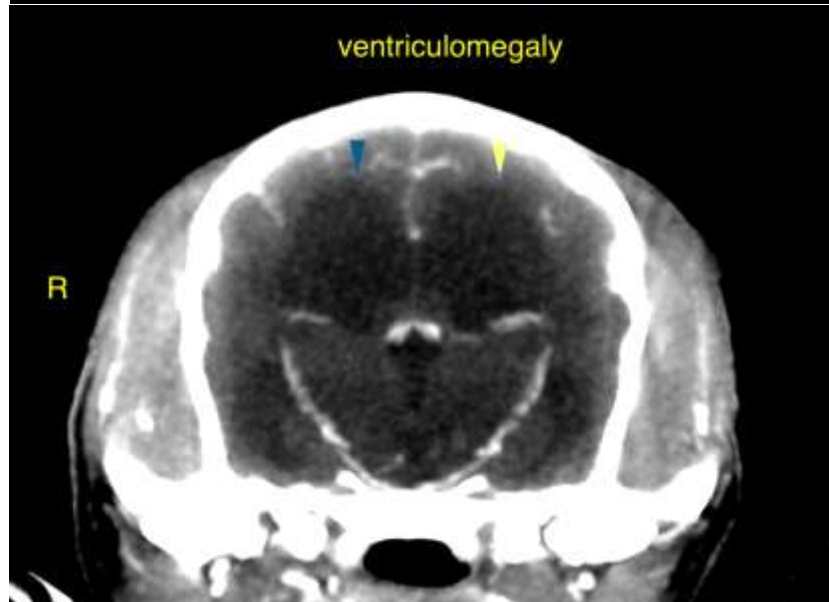
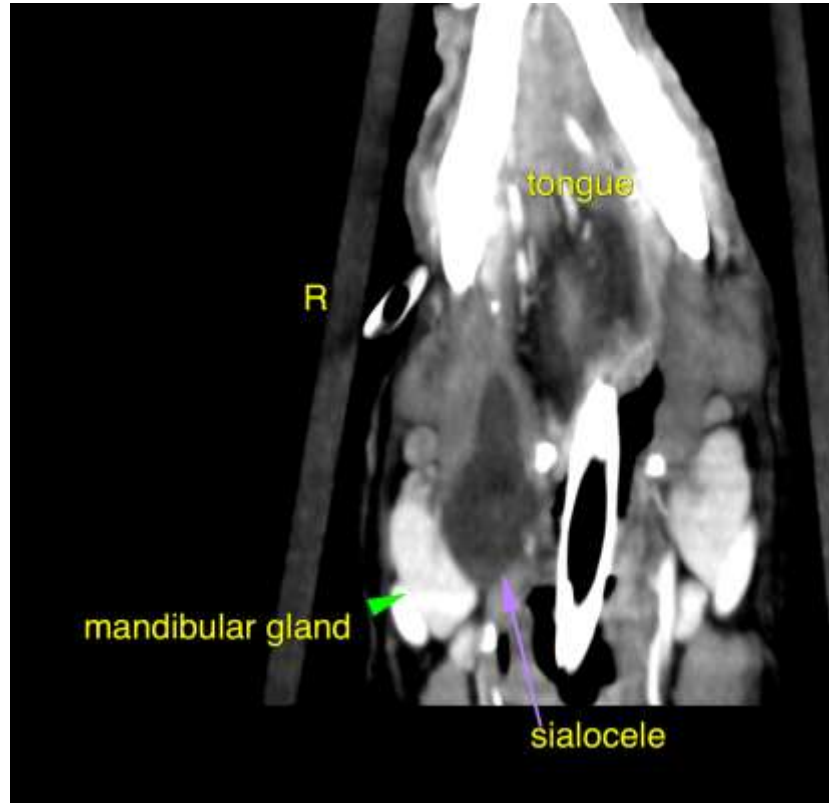
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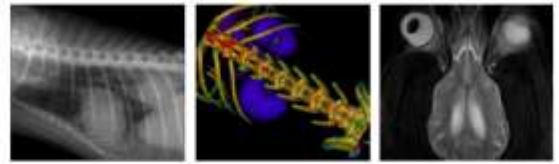
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
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