



PATIENT PRESENTING CLINICAL SIGNS

PATIENT
Bruno Kitty

SPECIES
Canine

BREED
Lab

SEX
MN

AGE
5 Years

INTERPRETED BY
Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME
Bridgwater
Veterinary Hospital
and Wellness Centre

REFERRING VET
Dr. Choptain

INVOICE
55784

DATE
12-22-22

On Dec. 21/22 owners noticed limping on the left hind leg which progressively got worse. Bruno was being treated with metronidazole for giardia after other dog in household was diagnosed. That evening Bruno had 5-6 grand mal seizures (no previous hx of seizures). In the AM of Dec. 22/22 owners felt he was losing strength in forelimbs. Presented to clinic with forelimb rigidity and hind limbs flaccid. No SP but DP and withdrawal present on hind limbs. Painful on manipulation of the neck to the right. When placed in sternal patient lifts right forelimb over head and alligator rolls to the left.
Abnormal PE/Chem/CBC/UA Results: CBC - mild neutrophilia Chem - mild decrease in ALP T4 - WNL 4DX - neg CSF unable to obtain

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & SPINE

Plain and post contrast studies of the head and plain study of the cervical, thoracic, and lumbar spine 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.

Thin and smoothly folded conchae and turbinates with even smooth mucosal lining. The osseous lining of the nasal cavities is intact.

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.

The visible dentition is within normal limits.

Spine

Number, alignment, and general anatomy of the cervical vertebrae present within normal limits.

Mild T5/6 spondylosis deformans is seen within the thoracic spine.

A moderate amount of new bone is emerging from the vertebral end plates and vertebrae of L1/2 and L2/3. Concurrent disc herniation cannot be seen.



PATIENT The remainder of the lumbar spine and the lumbosacral junction present within normal limits.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

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- Normal CT findings of the brain.
- Mild T5/6 spondylosis deformans.
- Spondylosis deformans L1/2 and L2/3.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals no evidence of structural brain injury. The negative CT findings support the potential for primary epilepsy. Complementary csf analysis could be considered in order to screen for inflammatory/infectious, metabolic/toxic, and other pathology.

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The findings in the cranial lumbar spine are suggestive for ongoing spondylosis deformans in terms of an active degenerative process. Spondylitis is a potential differential diagnosis.

No significant sublumbar muscle swelling was seen at this point.

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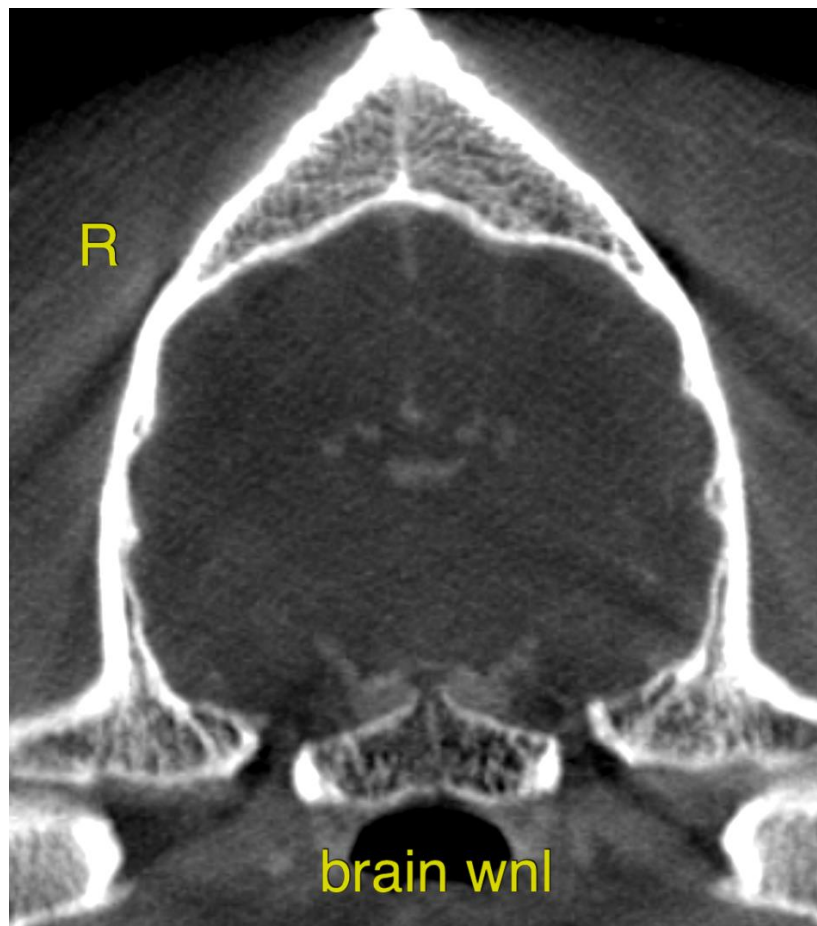
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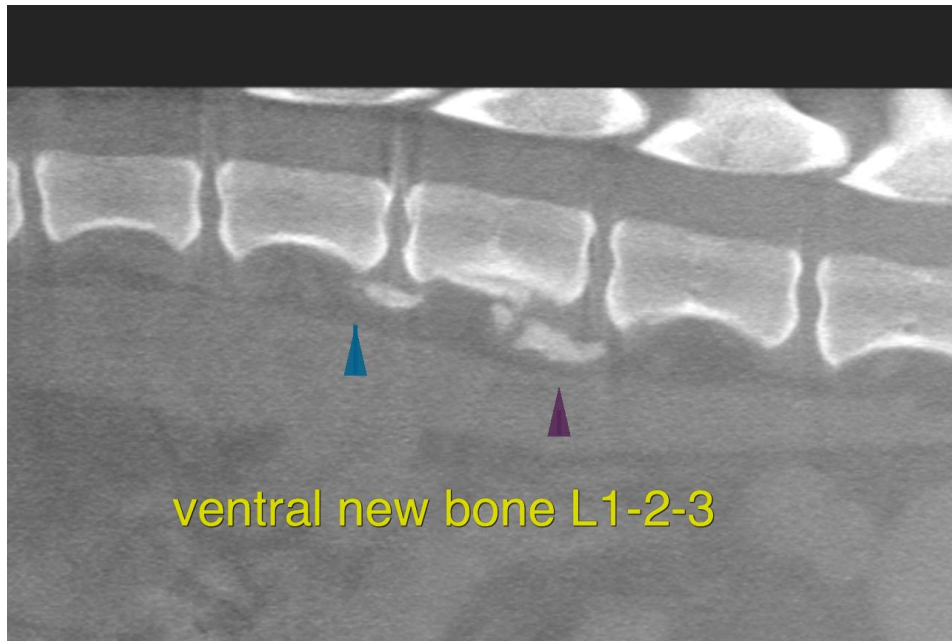
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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