



PATIENT

Mo Jennifer Brooks
Second Chance

SPECIES

Canine

BREED

Staffordshire Bull
Terrier

SEX

MN

AGE

3Y, 2M

WEIGHT

24.2kg

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

IMAGING PERFORMED BY

DG

HOSPITAL NAME

Animal Surgical Center -
Oceanside

REFERRING VET

Dr. Infernuso

INVOICE

73602

DATE

2-3-26

PRESENTING CLINICAL SIGNS

unable to open mouth

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Post contrast study available for review.

COMPUTED TOMOGRAPHIC FINDINGS

Bilateral conformation abnormalities of the temporomandibular joints are seen with altered inclination angles, asymmetric joint space narrowing accentuated medially where the joint spaces are nearly collapsed, flattened condylar processes, joint incongruence, and multiple articular subchondral bone defects with peripheral sclerosis.

The mandibles appear relatively narrow with lateral angulation of the bilateral mandibular premolar and molar teeth.

No gross soft tissue masses, mandibular fractures, or retrobulbar lesions are identified.

The regional lymph nodes present within normal limits.

Structural abnormality of the muscles of mastication cannot be seen. No significant asymmetry of the masticatory muscles is present.

There is no evidence of a mass effect along the pathway of the trigeminal nerves noted.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Bilateral temporomandibular joint conformational abnormalities with incongruence, flattening of condylar heads, subchondral bone defects, and asymmetric joint space narrowing.
- Mandibular narrowing with lateral tooth angulation – likely incidental.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals conformational abnormality of both temporomandibular joints with joint incongruence, flattening of right and left condylar heads, subchondral bone defects, and asymmetric joint space widening compatible with primary temporomandibular joint dysplasia, which is likely the primary cause of trismus. Differential considerations include masticatory muscle myositis and trigeminal neuropathy, or other neuromuscular inflammatory causes, though imaging features strongly favor temporomandibular joint pathology. Clinical correlation is recommended including evaluation of masticatory muscle pain and atrophy. Optional advanced testing includes serology for 2M antibodies, electromyography, or MRI if neuromuscular disease is suspected. Consultation of dental specialist for TMJ incongruence may be considered as well.



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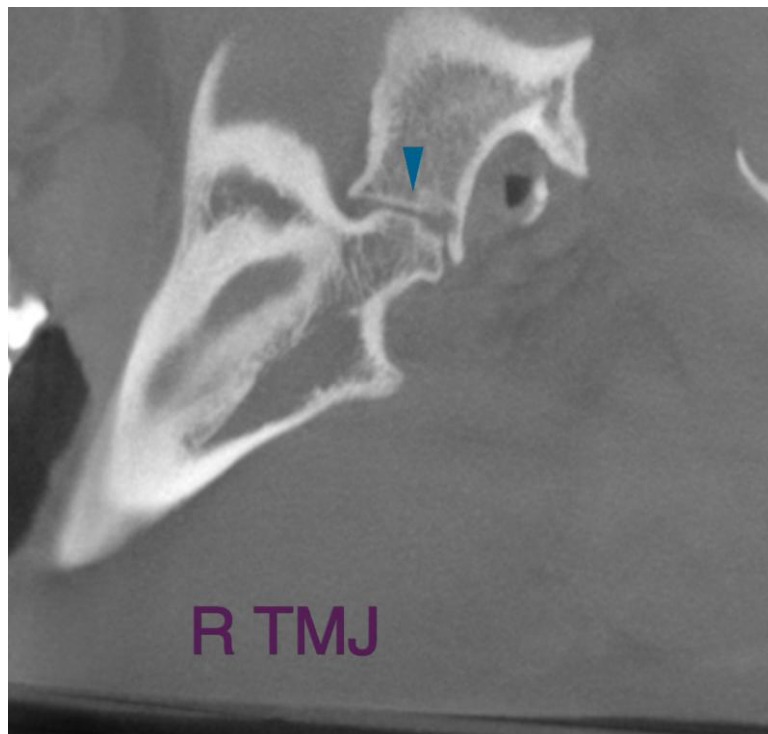
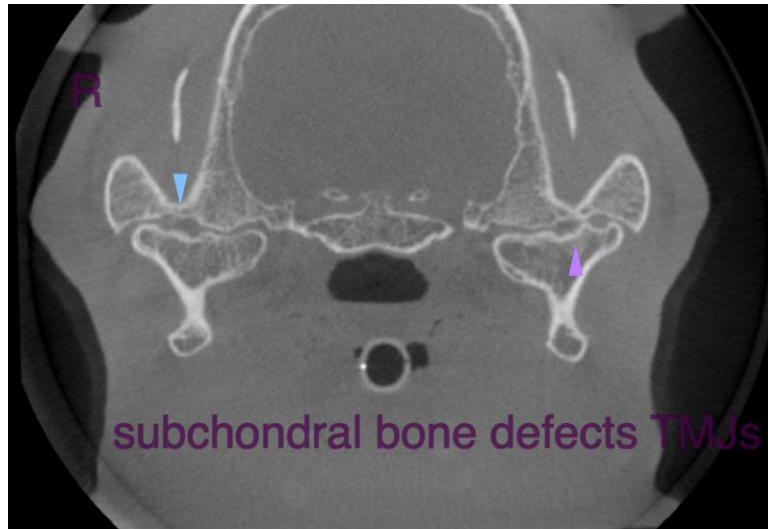
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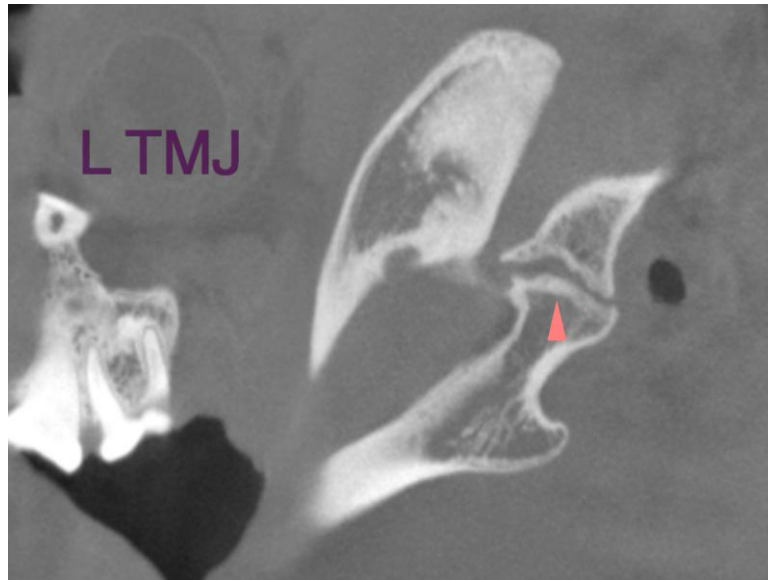
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley (Ondreka), DVM, Dr. med. vet., DipECVDI
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