


**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Angus Rempel  
**SPECIES** Canine  
**BREED** Jack Russell Terrier  
**SEX** Neutered Male  
**AGE** 7 Months

**PRESENTING CLINICAL SIGNS**  
 Objective: Vital parameters WNL General physical examination: Persistent hyperthermia. Neurological examination: Mentation: quiet, alert, responsive Gait and posture: Ambulatory without assistance. No ataxia, weakness, or lameness. The head is kept low, and there is mild to moderate reluctance to move quickly. There is a subtle/intermittent whole body sway Cranial nerves: No abnormalities Postural reactions: Normal in all four limbs Spinal reflexes: Normal Nociception: Normal Pain: None elicited, but based on posture I suspected possible headache. multifocal muscle changes, I consider primarily infectious including protozoal, vs. less likely immune-mediated SRMA or polymyositis

**MRI STUDY OF THE BRAIN & NECK**

**MRI STUDY OF THE BRAIN & NECK**  
 T2 Flair, T2\* diffusion weighted with ADC, T1 post-contrast, T1 Flair of the brain, T1 plain and post-contrast studies of the neck available for review.

**MRI FINDINGS**

**MRI FINDINGS**  
 The MRI study of the brain is within normal limits. No structural neuroparenchymal abnormality is noted. There is no evidence of restricted water diffusion, intercranial hemorrhage, pathologic contrast enhancement. The dimensions of the CSF spaces are considered within normal limits.

The number, alignment and anatomy of the cervical vertebrae present within age related normal limits.

Multifocally increased contrast enhancement is seen throughout the ep- and hypaxial musculature of the neck, including the longus colli, longus capitis, and sternocleidomastoideus muscles.

**INTERPRETED BY**

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

No evidence of structural abnormality of the masticatory muscles is seen. The muscle volume appears to be maintained.

Mild lymphadenomegaly of the retropharyngeal and cervical lymph nodes is noted.

**MRI DIAGNOSIS**
**HOSPITAL NAME**

Animal Health  
 Partners

- Polymyopathy with increased perfusion and multifocal distribution in the muscles of the neck
- Mild lymphadenomegaly of the retropharyngeal and cervical lymph nodes

**INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS**
**REFERRING VET**

Dr. Edouard Marchal

The MRI findings are compatible with polymyopathy with myositis being the most likely differential diagnosis. Consider infectious such as neospora, leptospira, toxoplasma, leishmania, hepatozoon rickettsia, clostridium or other versus immune mediated including SRMA and other. The negative MRI findings do not rule out concurrent meningitis/meningoencephalitis/vasculitis. Consider muscle nerve biopsies as well as CSF analysis for further definition.

**INVOICE**

36704

**DATE**

4/1/22



**PATIENT**

Angus Rempel

**SPECIES**

Canine

**BREED**

Jack Russell Terrier

**SEX**

Neutered Male

**AGE**

7 Months

**INTERPRETED BY**

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

**HOSPITAL NAME**

Animal Health  
Partners

**REFERRING VET**

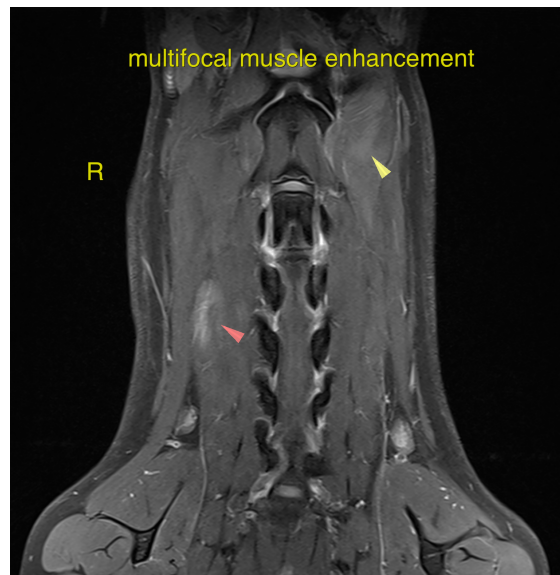
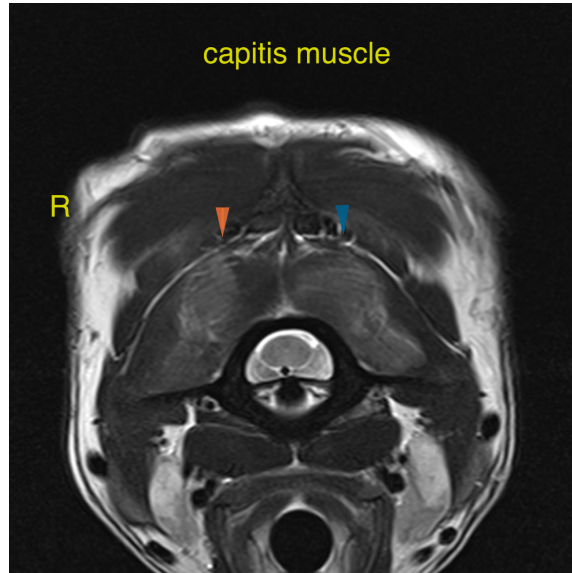
Dr. Edouard Marchal

**INVOICE**

36704

**DATE**

4/1/22



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  
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,  
Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.  
Nele.Eley@sonopath.com