

**PATIENT**

Molly Cleveland

SPECIES

Canine

BREED

Border Collie Mix

SEX

FS

AGE

13 Years

INTERPRETED BYNele Eley, DVM
Dr. med. Vet. DipECVDI**HOSPITAL NAME**Southern Oregon
Veterinary Specialty
Center**REFERRING VET**

Kim Winters

INVOICE

52046

DATE

5-10-22

PRESENTING CLINICAL SIGNS

Molly is here for a consult regarding chronic sneezing and clear nasal discharge since January 2022. Signs are worsening over time. She has completed several rounds of antibiotics after a culture of her nasal area, steroids were also dispensed once however Edward stated Molly was unable to control her urine in the house while on them. Maybe the cough and sneeze improved for the first few days but then signs returned. Molly has been taking proin for several years. No other medications. Her family has tried moistening the air with a vaporizer, which may have helped a little bit. Also tried OTC benadryl but that did not help either. She tends to have a hard time at night so that she is sneezing and coughing up phlegm. She seems to be able to breathe better after sneezing and coughing. She makes wheezing noises when breathing through her nose. She sounds congested and also snores when she is congested. Molly tends to wake them around 4am with coughing until she clears then clear discharge from both nostrils is noted. Molly is eating and drinking normally.. An xray was conducted at rdvm. When she sneezes, mucus comes out - slimy clear fluid that appears to come from both nostrils. nasal culture 3/1/22 - no fungus grown after 3 weeks (result 3/23), staph pseudointermedius and ecoli cultured 2/28/22-chem panel - ALT 164, glu 130, otherwise normal, lytes normal The other dog at home is not showing the same signs. She is not a working dog but lives on a ranch. There is a river on property and she likes to go in that.

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies available for review.

COMPUTED TOMOGRAPHIC FINDINGS

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.

A moderate amount of fluid attenuating material is present and accumulates on the floor of both nasal cavities. There is moderate bilateral mucosal swelling. No evidence of a mass lesion, foreign material, or turbinate destruction is seen.

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.

There appears to be no significant dental pathology that would correlate with the nasal disease.



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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Moderate bilateral nondestructive rhinitis.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are compatible with moderate bilateral nondestructive rhinitis/rhinosinusitis. Differential diagnosis includes lymphoplasmacytic, viral, and bacterial rhinitis. The findings are not typical for fungal rhinitis. There is no evidence of a soft tissue mass or foreign material. Consider endoscopy with sampling for further definition if not performed already.

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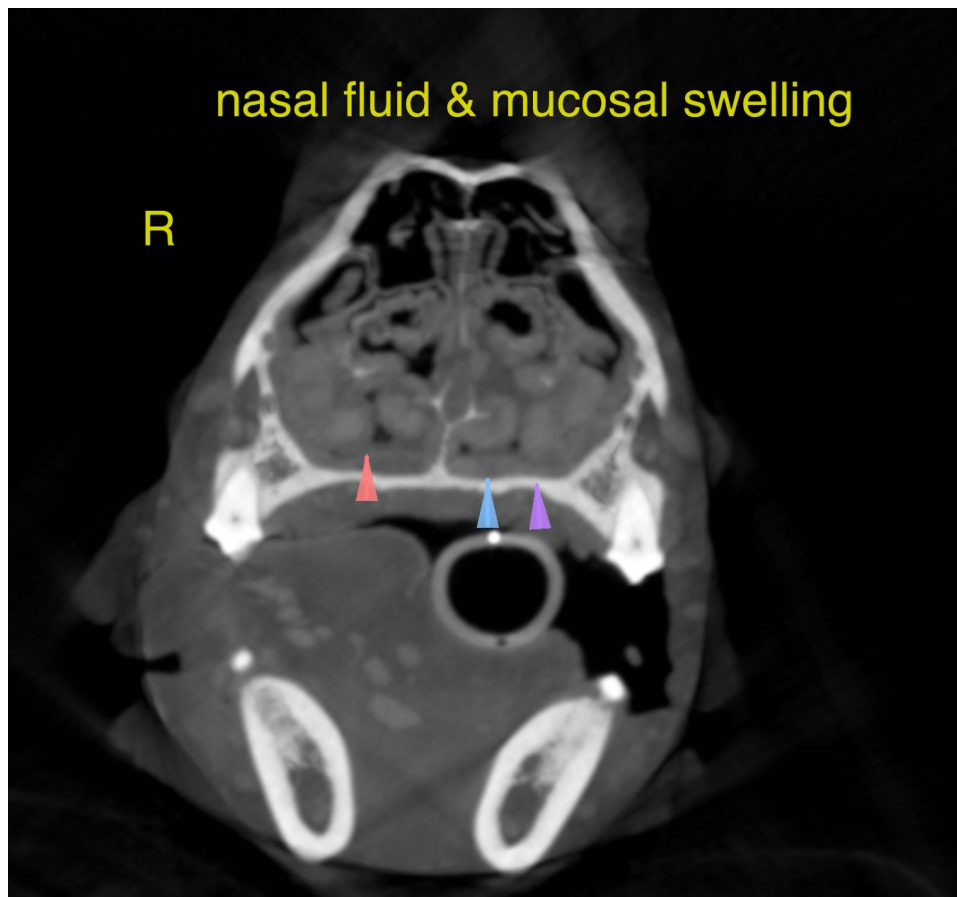
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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