



PATIENT PRESENTING CLINICAL SIGNS

Zeva Gilmore 1 week history for Pyrexia unknown origin - lethargic, inappotent, unable to open mouth, refusal solid foods proptosis developed, diffuse inflammation of the conjunctiva - slightly improved in the last 24hrs

SPECIES Abnormal PE/Chem/CBC/UA Results: neutrophilia moderate

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & THORAX

Plain and post contrast studies of the head and thorax in soft tissue, bone, and lung windows available for review.

BREED

Springer Spaniel

COMPUTED TOMOGRAPHIC FINDINGS

Head

SEX

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Extensive swelling of the left masticatory musculature accentuating the temporal masseter region is seen. There is an irregular shaped cavitory lesion with peripheral rim enhancement in the retrobulbar space medial to the coronoid process of the left mandible which extends caudally throughout the temporal region and muscle. Moderate left sided exophthalmos is seen. Approximate length of the lesion is 6 cm, width 3 cm, and height, depending on the position, varies between 1 cm and 4 cm.

AGE

9 Years

Contrast enhancement of the surrounding musculature is increased and slightly heterogeneous.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The left medial retropharyngeal lymph node is moderately enlarged with maintained short to long axis ratio.

Thorax

The bony and surrounding soft tissue structures are within normal limits.

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The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern are uniform and considered within normal limits.

REFERRING VET

Eamon

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

INVOICE

The lung parenchyma presents the expected architecture and attenuation behavior.

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Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

DATE

5-3-22

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Retrobulbar cavitory lesion with extensive into the temporal muscle in the left side of the face.
- Moderate circumferential cellulitis and myositis.



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- Regional lymphadenitis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are highly suggestive for retrobulbar and temporal muscle abscess. No foreign material is seen; however, foreign material related origin is considered likely. The foreign material may have migrated from the retromolar or other oral soft tissues into the retrobulbar space. Tumor with central tumoral necrosis can never be ruled out entirely; however, is thought by far less likely in this case and abscess drainage is recommended.

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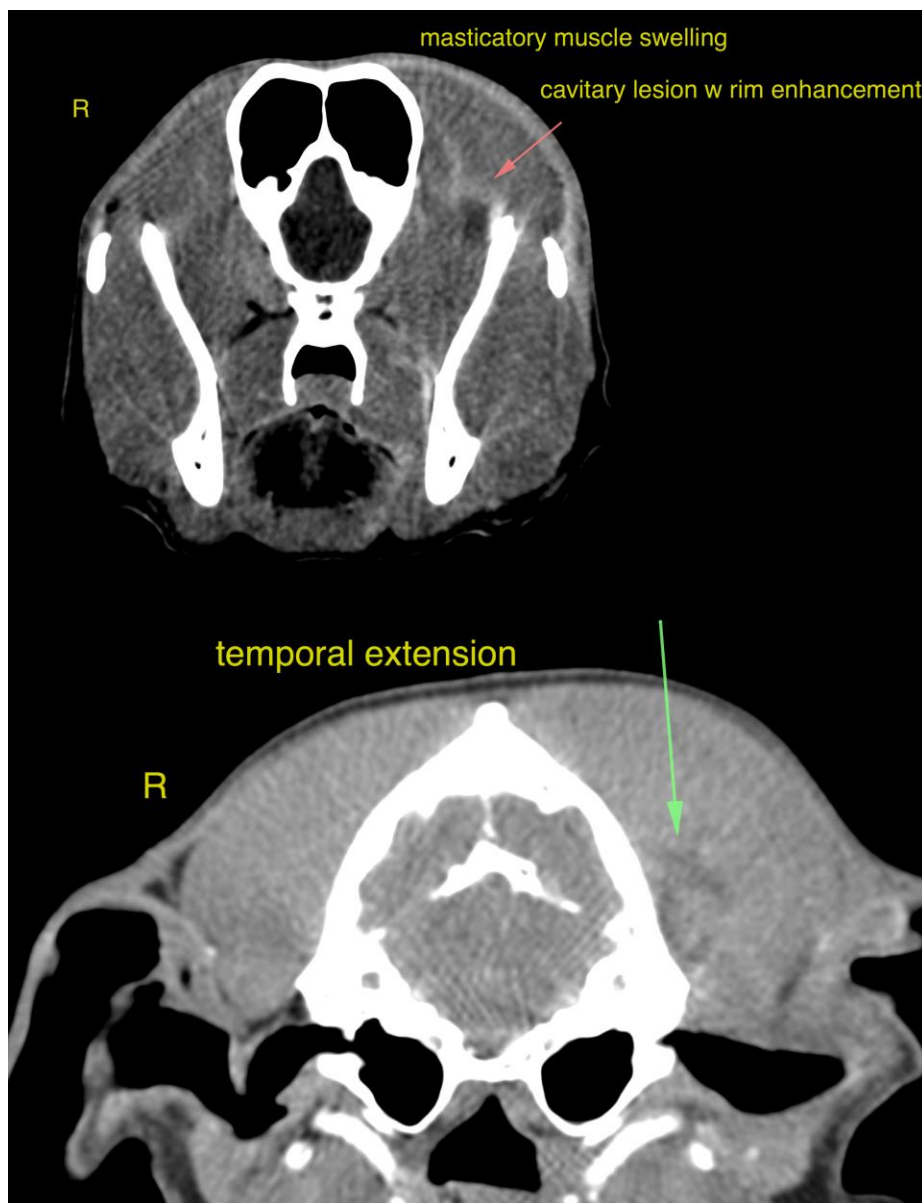
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PATIENT

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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.

SPECIES

Canine

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.

BREED

Springer Spaniel

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