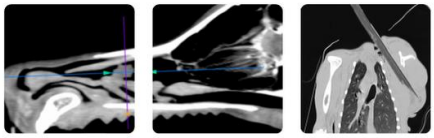

Teleradiology
Educational Teleconsultation Services™

PATIENT

Sparky Jablonski

SPECIES

Canine

BREED

Golden doodle

SEX

MN

AGE

6Y, 5M

WEIGHT

20.6kg

INTERPRETED BY

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

IMAGING PERFORMED BY

BN

HOSPITAL NAME

Bridgwater Veterinary Hospital and Wellness Centre

REFERRING VET

Dr. Mooi Aaron

INVOICE

74933

DATE

5-8-26

PRESENTING CLINICAL SIGNS

May 4/26: Presented for 3 day history of abnormal facial asymmetry and neurologic
Signs noted more clearly after being groomed/shaved, including concern for the OD not fully closing and possible ear related discomfort or infection.
No obvious head tilt seen by owner at home initially.
No circling reported.
Abnormal PE/Chem/CBC/UA Results: WBC=4.27 x 10^9/L NEUTS=2.42 x 10^9/L BUN=2.5 mmol/L CHOL=23.03 mmol/L

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies are 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.

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

Evaluation of the temporal bones shows normal morphology of the tympanic bullae bilaterally. The middle ear cavities are normally aerated without fluid, soft tissue opacification, or osseous lysis. The inner ear structures are symmetrical and within normal limits. Visualized portions of the facial nerve pathways are unremarkable on CT assessment with no evidence of mass lesion, bony canal expansion, or adjacent inflammatory changes. 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.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Normal CT examination of the brain and head.
- Normal CT appearance of middle and inner ear structures.
- No CT evidence of structural cause of facial nerve dysfunction is identified.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

No structural abnormalities are identified to explain acute facial asymmetry and incomplete eyelid closure. There is no evidence of otitis media, interna, space occupying lesion, or osseous facial canal pathology. Given the normal CT presentation, the clinical signs are most consistent with functional or nonstructural neuropathy with differentials including idiopathic facial nerve paralysis, early inflammatory neuropathy, peripheral nerve dysfunction secondary to soft tissue inflammation, and less likely metabolic or systemic neuropathy. Monitor for progression and consider recheck neurologic examination in 7-14 days which can include MRI of the head if signs do not resolve or worsen under symptomatic treatment.

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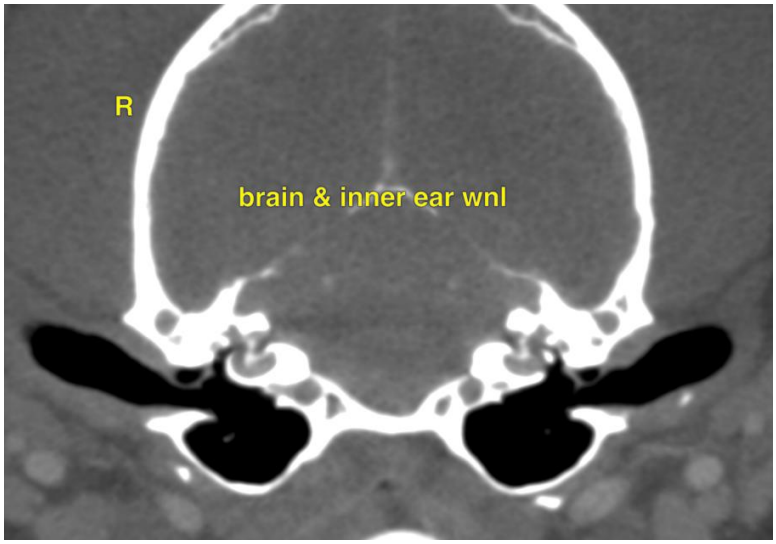

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.
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