SonoPath Teleradiology

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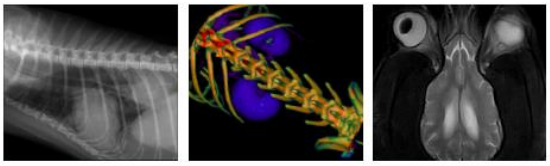

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Galilea Carrasquillo

SPECIES

Canine

BREED

Yorkshire Terrier

SEX

F

AGE

2 Months

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Veterinary Image Center

REFERRING VET

Dr. F. Caballero, DMV

INVOICE

59354

DATE

7-13-23

PRESENTING CLINICAL SIGNS

Patient had a head trauma past month were she falls on a empty pool. Previously seen at another vet, and was prescribed gabapentin and prednisolone. Today, patient had a neurologic episode were she collapse, was unable to walk and non responsive.
Abnormal PE/Chem/CBC/UA Results: CBC --- MON mild decreased and thrombocytosis
CHEM --- CREA mild decreased and AMYL mild decreased

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & NECK

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.

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

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.

The visible dentition is within normal limits.

The osseous structures of the facial and neurocranium present within normal limits. No evidence of traumatic osseous injury of the skull is seen.

The odontoid peg is short and stunted in appearance. The centrum of the atlas appears to be absent and there is mild caudal and minimal dorsal subluxation of the axis with respect to the atlas.

At the time of the examination, there is no evidence of spinal cord compression.

The remainder of the cervical vertebrae and cervical spine present within normal limits.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Hypoplasia of the odontoid peg with mild atlantoaxial subluxation.

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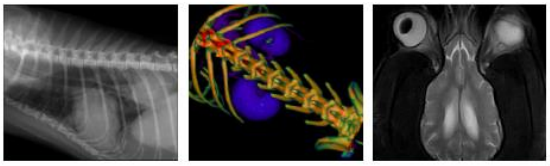

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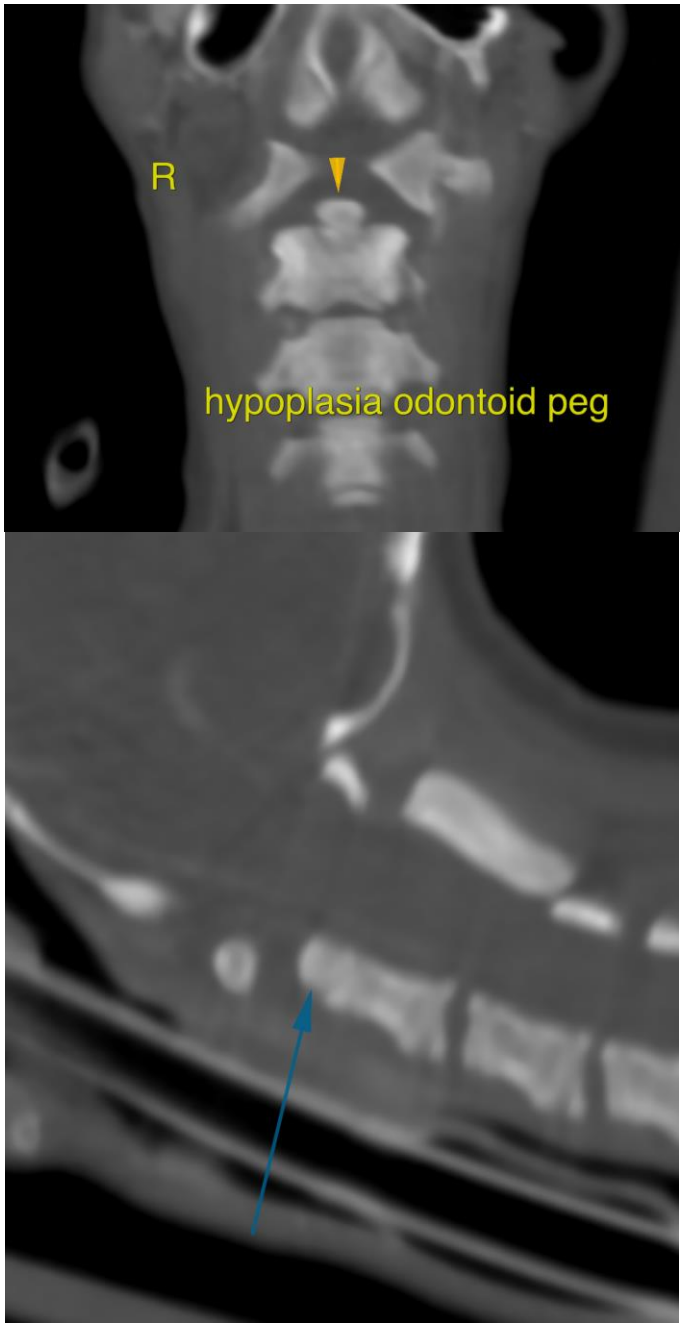
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals hypoplasia of the odontoid peg. The degree of atlantoaxial subluxation is minimal at the time of the examination; however, there is potential for more severe subluxation with compressive myelopathy which typically shows with intermittent clinical signs as described in the patient's history with head motion. Therapeutic options to stabilize the atlantoaxial junction should be discussed.



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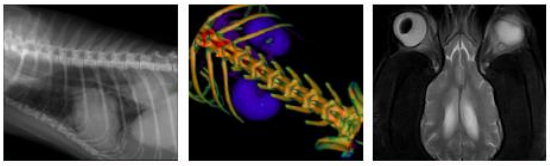

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley, DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
info@sonopath.com