



**PATIENT**

Riley Clark

**PRESENTING CLINICAL SIGNS**

Seizure history Ddx rule out skull neoplasia and abdominal liver shunt.

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC STUDY OF THE HEAD, THORAX, & ABDOMEN**

Plain and post contrast studies of the head and abdomen and post contrast study only of the thorax available for review.

**BREED**

Havanese

**COMPUTED TOMOGRAPHIC FINDINGS**

**Head**

The pictured parts of the dentition are complete and unremarkable in all jaw quadrants.

**SEX**

Male Neutered

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

**AGE**

4 Years

The tympanic bullae are aerated, the mucosal lining is not seen, and the bony wall is smooth and thin. The external ear canals are within normal limits.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio of < 0.5. The attenuation and contrast enhancement pattern are uniform.

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**Abdomen**

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

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Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

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Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable. The extra- and intra-hepatic portal vein branching is within normal limits. No evidence of portosystemic shunting is seen.

**DATE**

8-12-21

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, and wall of the gastrointestinal tract are considered within normal

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limits throughout. A mild amount of faintly mineral opaque material is seen within the gastric outlet and descending duodenum without evidence of obstruction.

The bony and surrounding soft tissue structures reveal no abnormalities.

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**Thorax**

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

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Havanese

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.

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

**SEX**

Male Neutered

There is mild dorsoventral collapse of the intrathoracic trachea.

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.

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4 Years

The lung parenchyma presents the expected architecture and attenuation behavior.

Moderate dilation of the esophagus with gas and a mild amount of fluid is seen and most likely related to the general anesthesia.

**INTERPRETED BY**Nele Eley, DVM  
Dr. med. Vet. DipECVDI**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Structurally normal CT study of the brain.
- Structurally normal CT study of the abdomen - no evidence of portosystemic shunting.
- Mild tracheal collapse.
- Presumably anesthesia related dilation of the esophagus.

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CFL**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No structural pathology of the brain can be identified in the CT study. There also is no evidence of portosystemic shunting, even though microvascular dysplasia and other hepatic dysfunction cannot be ruled out entirely. Consider complementary csf analysis in order to screen for inflammatory/infectious, metabolic/toxic, and neurodegenerative pathology. With the negative CT findings, idiopathic/primary epilepsy appears to be a potential as well.

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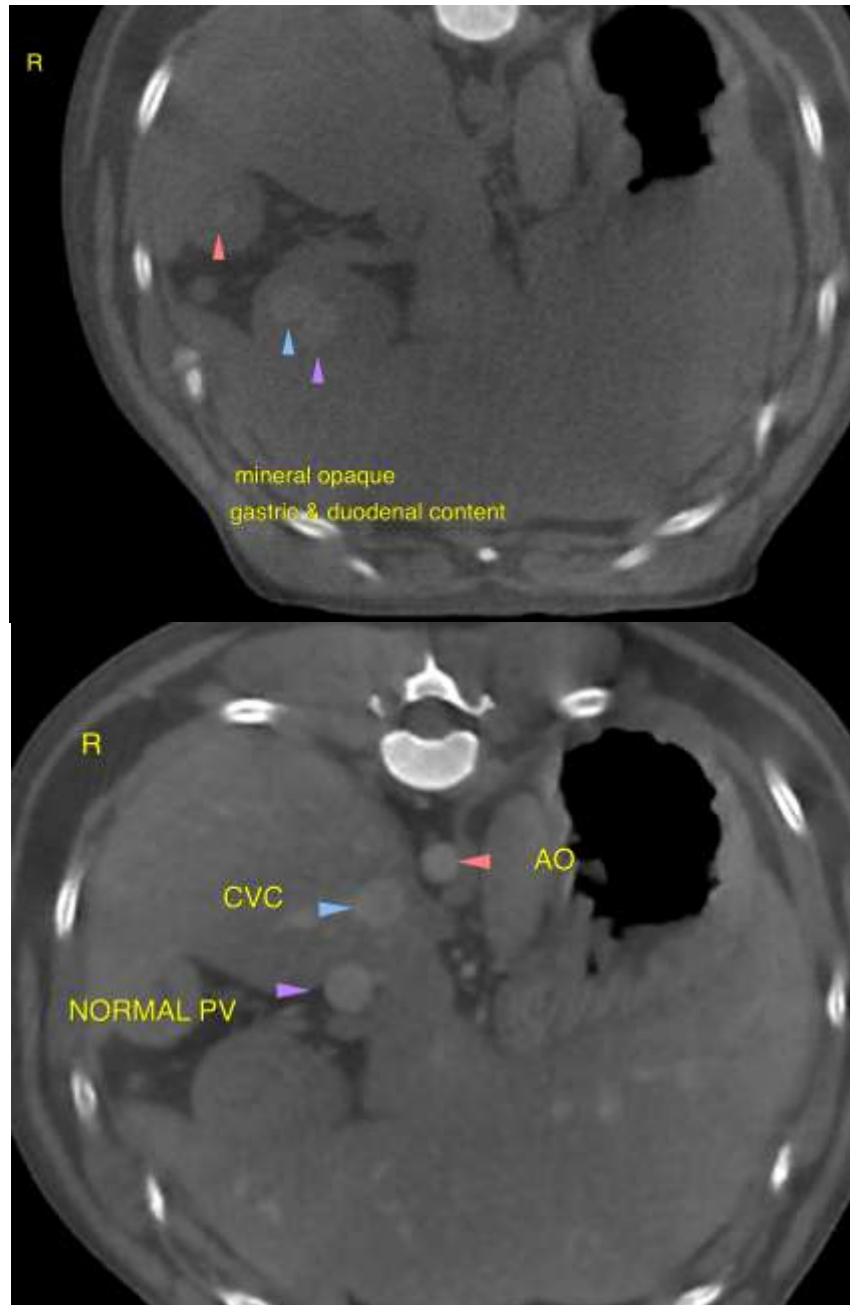
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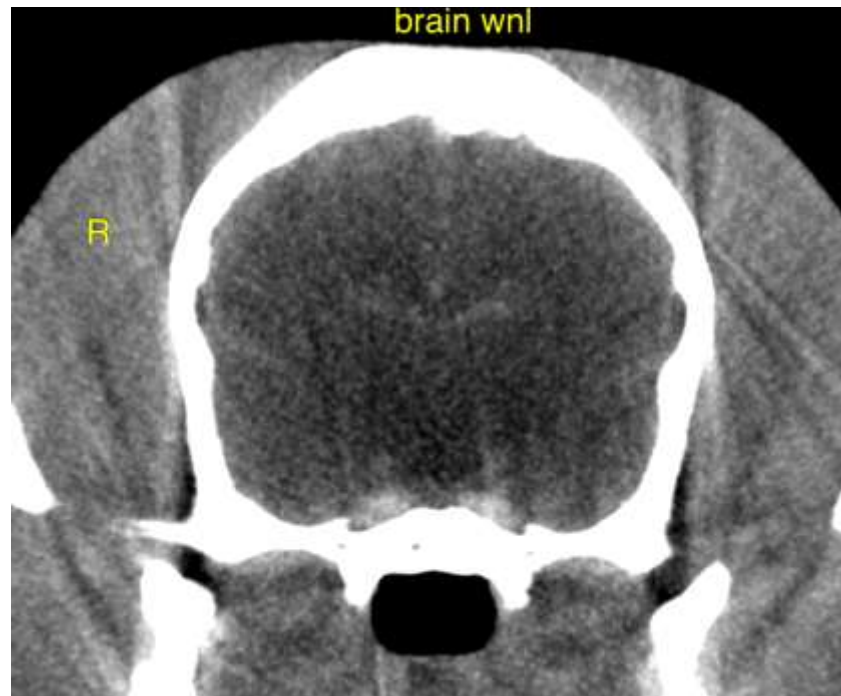
Havanese

**SEX**

Male Neutered

**AGE**

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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.

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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  
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