



PATIENT PRESENTING CLINICAL SIGNS

PATIENT
Mella Racette

SPECIES
Canine

BREED
French Bulldog

Pet presented for acute vestibular disease and possible seizure on 7/17/22 through emergency. PE findings included horizontal nystagmus, patient comfortable in right lateral, absent palpebral and menace OS consistent with facial nerve paralysis on the left side, and drainage from the left ear canal. Owner declined further work up (recommended neuro consult and MRI), started empirical treatment with oral prednisone and amoxicillin combined with topical otic baytril+miconazole+dexamethasone. Pet showed improvement in severity of vestibular signs and was discharged 7/22/22. Mella rechecked on 8/14 - a pink, smooth, rounded mass was visualized in the horizontal canal AS, and pet continues to have absent blink and menace response OS. CT today to assess mass margins and consider TECABO if possible.

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies available for review.

SEX COMPUTED TOMOGRAPHIC FINDINGS

SEX
FX

AGE
7 Years

The left tympanic bulla is filled with fluid attenuating contrast negative material. Porosity and irregular thickening of the osseous lining of the tympanic bullae are seen. There are also pinpoint defects within the osseous cochlea and labyrinthium of the left inner ear. Regional meningeal and/or cranial nerve thickening involving the vestibulocochlear and facial nerves of the left side with increased contrast enhancement are seen. The left external auditory meatus contains fluid attenuating material and presents thickening of its epithelial lining accentuated in the horizontal medial part.

INTERPRETED BY
Nele Eley, DVM
Dr. med. Vet. DipECVDI

The left medial retropharyngeal and submandibular lymph nodes are mildly enlarged with heterogeneous contrast enhancement.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Chronic left sided otitis externa, media, and interna with intracranial extension.
- Left sided medial retropharyngeal and submandibular lymphadenomegaly compatible with reactive hyperplasia.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME
Wilson Veterinary Hospital

REFERRING VET
Dr. Vitale

The CT findings suggest presence of severe chronic left middle and inner ear infection with intracranial extension in terms of reactive meningitis and neuritis of the vestibulocochlear and facial nerves. Further definition by means of otoscopy and csf analysis could be considered.

The option of bulla osteotomy (and ear canal ablation) as well as antimicrobial treatment according to culture and sensitivity should be discussed.

INVOICE

53470

DATE

8-15-22



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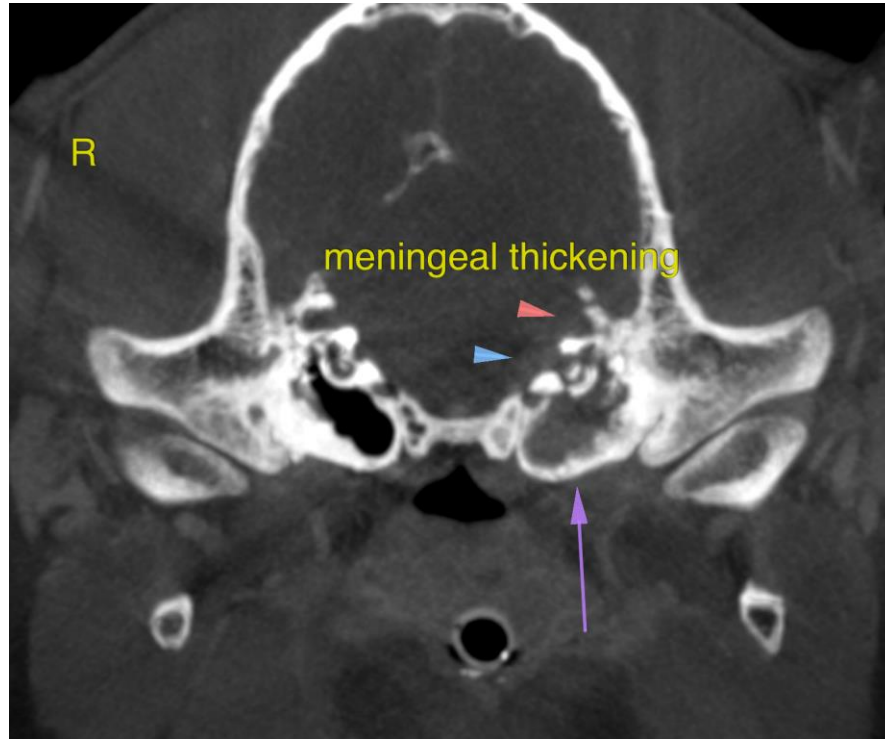
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

HOSPITAL NAME

Wilson Veterinary
Hospital

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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