



**PATIENT PRESENTING CLINICAL SIGNS**

Muffin Lora patient came in for apparent neurological episodes --the owner describes blindness??? with rigidity and urination the first one happened a week ago and now happened again yesterday no poisons in the house or other noxious material recommended full work up with ct scan to rule out mass or possible shunt ?? focal ultrasound - no overt dz pending CT scan iop - 15 - OD 16 OSf. stain - neg menace present

**SPECIES**

Canine

**BREED**

Toy Poodle

Abnormal PE/Chem/CBC/UA Results: PE General Appear anxious BAR Eyes no evidence of overt dz Oral-Teeth mild periodontal dz Cardiovascular no murmur or arrhythmia Neurological normal at the time of exam Musculoskeletal bilateral MPL grade 2 CBC --- unremarkable CHEM - --- unremarkable NH3 --- unremarkable SDMA --- unremarkable BILE ACIDS: Pre and PostPrandrial --- normal Thyroid Panel(Total T4, Free T4 and TSH) --- normal Fecal --- none seen Urinalysis --- unremarkable

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

**SEX**

Plain and post contrast studies available for review.

SF

**COMPUTED TOMOGRAPHIC FINDINGS**

**AGE**

2 Years

**Head**

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.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

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

**HOSPITAL NAME**

Veterinary Image Center

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

**REFERRING VET**

Dr. F. Ortiz, DVM

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.

**INVOICE**

59920

The visible dentition is within normal limits.

**Thorax**

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

**DATE**

8-24-23

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.



**PATIENT**

Muffin Lora

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.

**SPECIES**

Canine

The lung parenchyma presents the expected architecture and attenuation behavior.

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

**BREED**

Toy Poodle

**Abdomen**

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

**SEX**

SF

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.

**AGE**

2 Years

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

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

**INTERPRETED BY**

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The portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.

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

**HOSPITAL NAME**

Veterinary Image  
Center

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

**Neck & Spine**

Both lobes of the thyroid gland are seen and present within normal limits.

**REFERRING VET**

Dr. F. Ortiz, DVM

The cervical trachea presents within normal limits.

Number, alignment, and general anatomy of the cervical, thoracic, and lumbar vertebrae present within normal limits.

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Both coxofemoral joints reveal mild signs of canine hip dysplasia with mild secondary osteoarthritis represented by circumferential femoral head and caudolateral curvilinear femoral neck osteophytes.

**DATE**

8-24-23

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Normal CT findings of the brain, thorax, abdomen, and spine.



**PATIENT**

Muffin Lora

**SPECIES**

Canine

**BREED**

Toy Poodle

**SEX**

SF

**AGE**

2 Years

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**HOSPITAL NAME**

Veterinary Image  
Center

**REFERRING VET**

Dr. F. Ortiz, DVM

**INVOICE**

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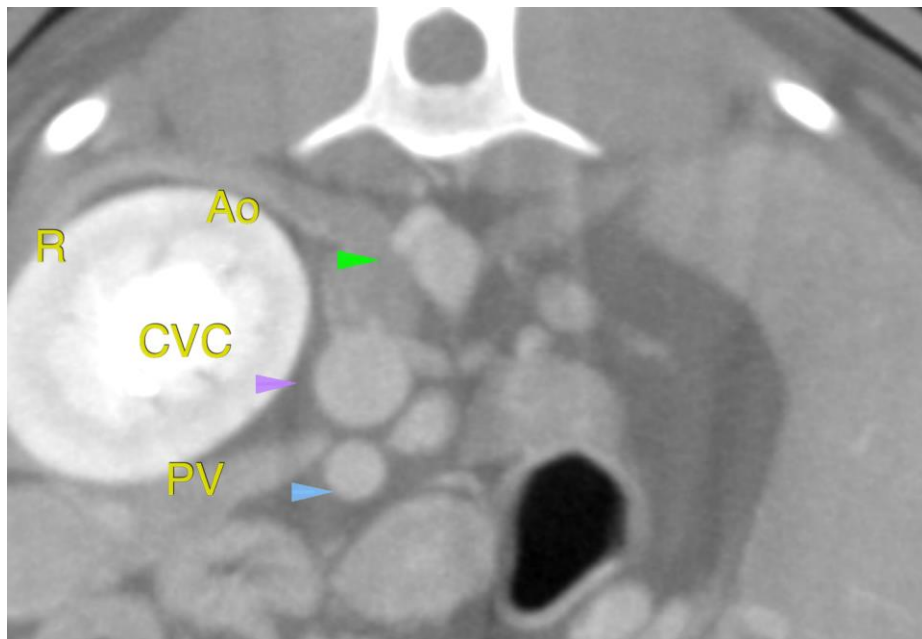
**DATE**

8-24-23

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT study does not reveal evidence of structural brain pathology. The negative CT findings render primary epilepsy a high potential. Complementary CSF analysis is recommended in order to screen for differential diagnoses such as inflammatory/infectious, metabolic/toxic, neurodegenerative, and other.

There is no evidence of a macromorphological portosystemic shunt. Liver and portal vasculature present within normal limits. Microvascular dysplasia cannot be ruled out entirely and liver biopsy could be considered in case of clinical and laboratory signs suggesting presence of portosystemic bypass and encephalopathy.



**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.

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