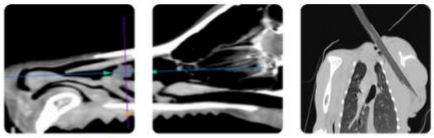

PATIENT

Hanna ISBR

SPECIES

Canine

BREED

Saint Bernard

SEX

Female

AGE

13 Weeks

WEIGHT

24.8 Pounds

INTERPRETED BY

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging

IMAGING PERFORMED BY

Tina Lynn, CVT/George Eales,DVM

HOSPITAL NAME

Green Prairie AH

REFERRING VET

Dr. George Eales

INVOICE

35443

DATE

1/15/26

PRESENTING CLINICAL SIGNS

History: Relinquished to shelter at 8 weeks of age, went to new foster about a week ago, has always had "neurologic" signs, currently it has a lateral nystagmus w/occasional rotary phase. Seems to have difficulty visualizing below shoulder level.

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

The interhemispheric gap is in the midline with no evidence of a mass effect. As far as can be assessed, there are regular cortical gyri in the cerebral and cerebellar region with a symmetrical ventricular system. The brain stem and cerebellum are inconspicuous. The pituitary gland is within normal limits.

The bony structures of the skull are juvenile and appear mildly hyperostotic. The skull foramina of the cranial nerves are laterally symmetrical and inconspicuous.

Both tympanic bullae are completely ventilated with a regular tympanic bulla wall. The external ear canals are ventilated in all sections with inconspicuous walls. The temporomandibular joints and the nasopharyngeal meatus have no particular findings.

Both frontal sinuses and the orbital contents are laterally symmetrical without evidence of a retro-/bulbar lesion.

The nasal cavities are ventilated regularly. Conches appear normal as well as the juvenile maxillary/mandibular teeth.

Post contrast images show no pathological enhancement. The soft tissues of the head and neck are symmetrical and inconspicuous, especially the mandibular and medial retropharyngeal lymph nodes are unremarkable.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Normal CT findings of the head

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings show no signs of a neoplastic or an inflammatory process. Intra-axial lesions such as infarcts, small edema, degenerative disease/different types of encephalopathies or low-grade neoplasia are difficult to recognize in CT and therefore not ruled out completely.

The mildly hyperostotic skull bones are thought to be within normal limits and breed appropriate and probably do not have clinical relevance.

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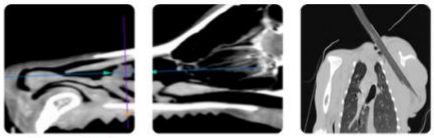

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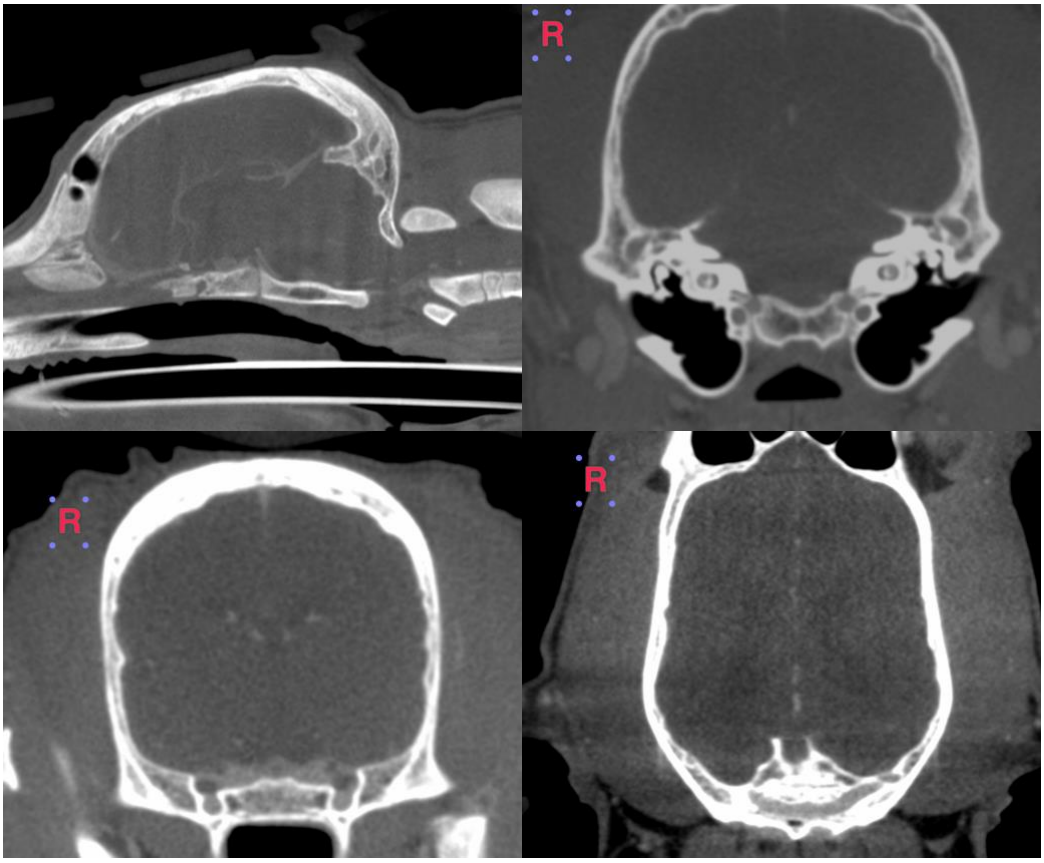

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
info@sonopath.com