



PATIENT

Maui Coniglio

PRESENTING CLINICAL SIGNS

diarrhea, inappetence, hypoglycemia, pyrexia, lethargic. Has had several episodes of GI signs past few months- current episode responding to medical mgmt. BW suggestive of inflammation but otherwise unremarkable. Splenic nodule noted on previous abdo US. R submandibular lymph node enlarged.

SPECIES

Canine

COMPUTED TOMOGRAPHIC FINDINGS

BREED

Italian Greyhound

Head:

Mild cerebellar herniation is suspected. The interhemispheric gap is in the midline with no evidence of a mass effect. There is mild asymmetry of the 2nd ventricles noted. Brain stem is inconspicuous. Pituitary gland is within normal limits. Bony structures of skull and the skull foramina of the cranial nerves are laterally symmetrical and inconspicuous.

SEX

Female

Both tympanic bullae are completely ventilated with a mild amount of fluid on the left, bulla walls are regular. External ear canals are ventilated in all sections, walls of the external ear canals, the adjacent temporomandibular joints and the nasopharyngeal meatus have no particular findings.

AGE

12 Years

Frontal sinuses and the orbital contents are laterally symmetrical without evidence of a retrobulbar lesion. Nasal cavities are ventilated regularly. Soft tissues of the head and neck show mild enlargement of the mandibular lymph nodes.

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet
Specialist in
Diagnostic Imaging

Spine:

There is marked kyphosis recognized in the course of the thoracic spine. Presented bony structures of the spine are unremarkable with an inconspicuous harmonic atlanto-occipital and -axial transition and a thoracolumbar- and lumbosacral transition.

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Vertebral bodies are of regular density without signs of a lytic or sclerotic process. There is no evidence of a fracture and/or sub-/luxation.

REFERRING VET

Dr. Shannon
Westgarth

Calcification of the nuclei is not recognized. The intervertebral disc spaces are of even diameter. At the level of L6/7 a mild, calcified disc protrusion is recognized located medial to left-medial. Compressive signs are missing.

Paravertebral soft tissues are bilaterally symmetrical, especially the course of the femoral and sciatic nerves is inconspicuous. Unilateral atrophy of the paraspinal and/or pelvic musculature is not noted.

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Thorax:

The lungs are regularly ventilated with close contact to the inner thoracic wall on all sides. No evidence of pleural thickening, fluid accumulation or free pleural gas is noticed.

DATE

8-30-21

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Pulmonary density is within normal limits, there is no evidence of focal or nodular pulmonary lesions.

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Mediastinum is regular in width and density. Mediastinal (sternal, tracheal-, bronchial) lymph nodes are considered to be normal. Thoracic trachea and esophagus present as expected.

Diaphragm is normal.

BREED

Italian Greyhound

Abdomen:

Images after contrast unfortunately show poor enhancement, assessment of the abdomen is limited.

SEX

Female

Liver and spleen show normal findings in terms of size, surface and shape.

Pancreas presents normal size and shape with a smooth surface. The peripancreatic fat tissue and omentum are inconspicuous. Unremarkable presentation of the bilaterally symmetrical kidneys.

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Adrenal glands are in normal limits.

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As far as can be assessed, the stomach and all parts of intestine are regularly presented without any indication of a relevant wall thickening or a mass. Ureters, urinary bladder, trigonum and urethra are presented as expected. Abdominal lymph nodes have no particular findings. Signs of peritoneal/retroperitoneal effusion or free gas are not recognized.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Mild cerebellar herniation is suspected
- Mild asymmetry of the 2nd ventricles
- Signs of a subtle otitis media on the left
- Mild, right-sided mandibular lymphadenopathy
- Kyphosis thoracic spine
- Mild, calcified disc protrusion L6/7 without compressive signs
- Normal pre contrast CT findings of the chest/abdomen

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT findings show no signs of a neoplastic or a severe inflammatory process. This does exclude functional/inflammatory disorders of the intestines as seen with acute/chronic enteritis/IBD. The unilateral enlargement of the mandibular lymph nodes could be reactive/inflammatory due to inflammation/infection of the oral cavity. FNA could be performed next.

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Due to poor contrast enhancement, abdominal organs show normal findings. There are no protruding lesions detected. Focal/nodular changes cannot be fully excluded.



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The suspected mild cerebellar herniation, the mild filling of the left bulla, the asymmetry of ventricles and the protrusion at L6/7 must be correlated with the clinical presentation and may be incidental.

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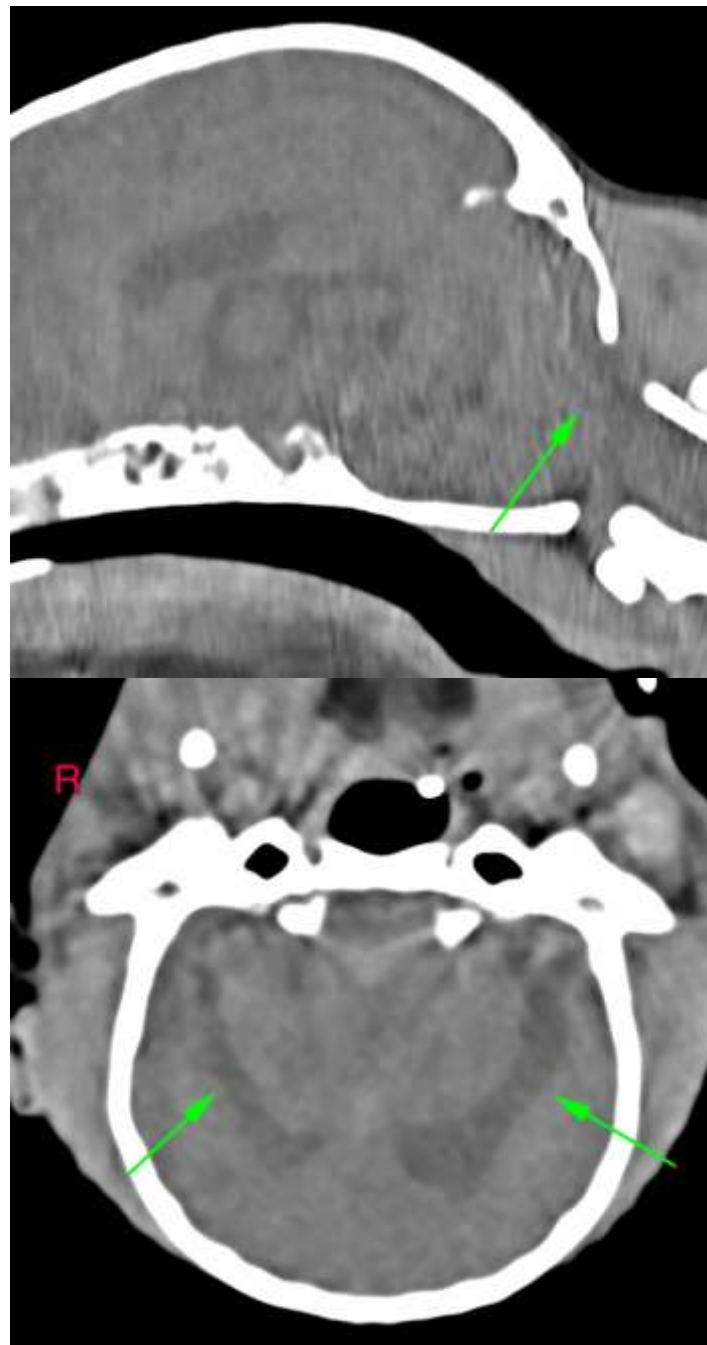
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

HOSPITAL NAME

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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.

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