



PATIENT

Max Dongelewic

PRESENTING CLINICAL SIGNS

Computed Tomography for Max Dongelewic Max was anesthetized to examine the brain . An injectable contrast agent was given intravenously, and the scan was repeated. The images were sent for a radiology consultation and the report is pending. Veterinarian: Rory D. Applegate, DVM, DACVIM

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL

A high resolution pre- and post-contrast CT study of the skull is provided for review.

BREED

Australian Shepard

COMPUTED TOMOGRAPHIC FINDINGS

Triadan 108 is absent.

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

SEX

Male

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

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

AGE

5 Years

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

HOSPITAL NAME

Southern Oregon
Veterinary Specialty
Center

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Absent triadan 108
- Structural normal brain

REFERRING VET

Rory Applegate

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

In the present study of the brain there is no evidence of macromorphological disease.

Depending on the presenting clinical signs, workup should be complemented by examination of CSF and complete bloodwork to screen for brain disease that is not necessarily associated with structural changes of the brain parenchyma and rule out hepatoencephalopathy and other systemic illness. In case of the strong clinical suspicion of structural intraparenchymal changes an MRI may be considered.

INVOICE

56305

DATE

1-22-23



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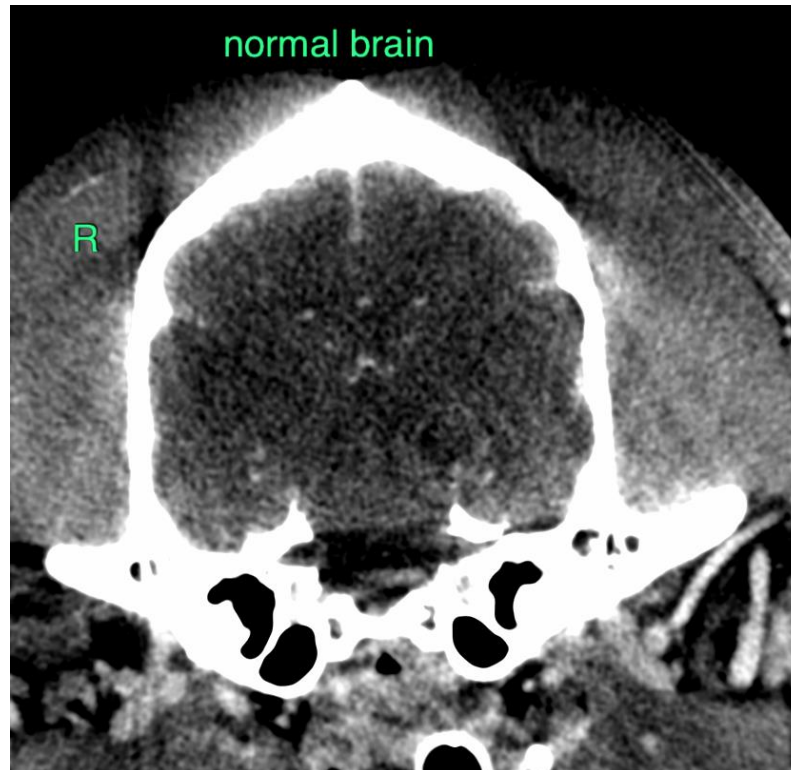
Rory Applegate

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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 Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
sebast.schaub@gmail.com