



PATIENT

Abby Robinson

PRESENTING CLINICAL SIGNS

Progressive decline in neurological status since Dec 24/21, head tilt, circling to the left. Would like to know causation of neurological signs.
Abnormal PE/Chem/CBC/UA Results: Mild increase in BUN/creatinine

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL

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

BREED

Schnauzer

COMPUTED TOMOGRAPHIC FINDINGS

The tooth elements 108-110, 209, 210, 302, 303, 310 and 311 are absent. All teeth present evidence of mild to moderate periodontal disease. There is a connection between the alveolar crest of triadan 104 and the right nasal cavity.

SEX

FS

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

AGE

14 Years, 2 Months

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

HOSPITAL NAME

Bridgwater
Veterinary Hospital
and Wellness Centre

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.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Oronasal fistula formation triadan 104
- Generalized periodontal disease with multifocal tooth root resorption
- Multiple absent teeth, see above
- Normal brain

REFERRING VET

Dr. K. Choptain

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

49846

The current CT study of the skull presents no macromorphological abnormality, explaining the described clinical signs. Ischemic insult might be a potential. If not done so yet, complementing workup by a CSF tap is recommended. If there is strong suspicion for intraparenchymal changes of the CNS, an MRI study of the brain can be used as advanced imaging modality.

DATE

1-26-22



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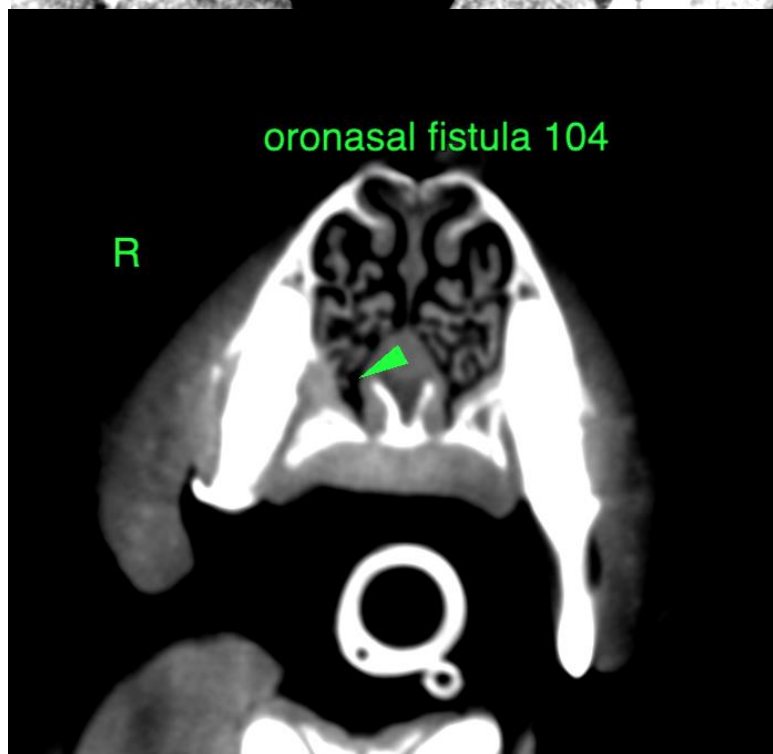
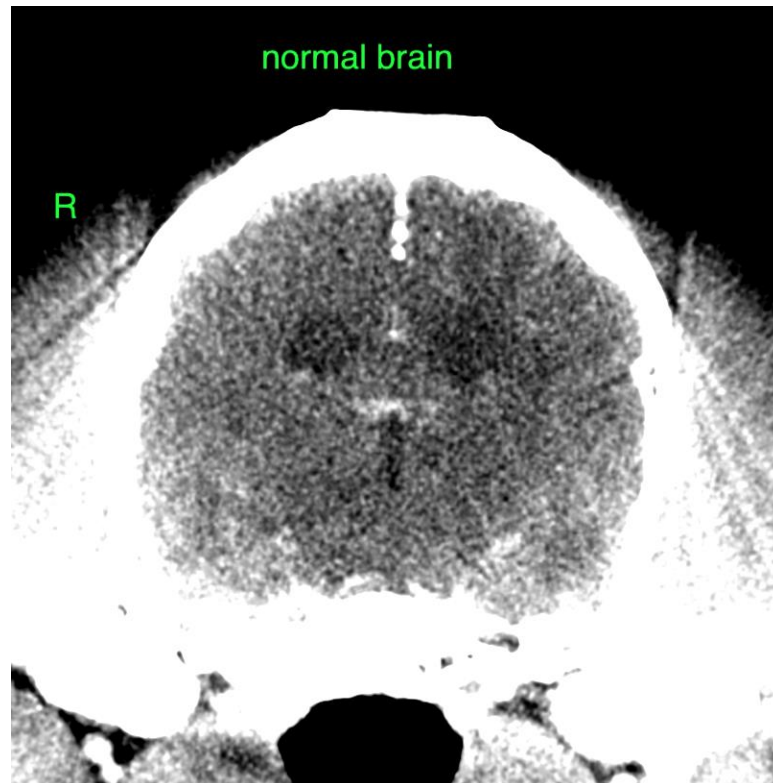
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

BREED

Schnauzer

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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FS

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