



## PATIENT

Timon McLean

## SPECIES

Canine

## BREED

Pomeranian

## SEX

Mi

## AGE

3Y, 6M

## WEIGHT

4.71

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet.  
DipECVDI

## IMAGING PERFORMED BY

Janice

## HOSPITAL NAME

Bridgwater Veterinary  
Hospital and Wellness  
Centre

## REFERRING VET

Dr. N. Brown

## INVOICE

73513

## DATE

1-28-26

## PRESENTING CLINICAL SIGNS

History:

- CSF - had an episode in July - vomited & gagged, then started licking foot, back legs went straight & started dragging hind end. Dx at that time as IVDD. Jan 26 dry heaving x3 d, panting, not wanting to do stairs, lower energy, vomiting water. Dry cough on tracheal palpation. Jan 27 fell over & started rolling over, legs shaking, foaming at the mouth, heavy breathing. No neuro deficits, ambulatory, mild neck pain. Had repeat episode a few hours later. Seems like he cannot get his feet under himself & panicking, shaking. Head tilt.

Abnormal PE/Chem/CBC/UA Results: Chest rads: WNL CBC: WNL Chem: WNL T4: WNL 4dx: WNL

## COMPUTED TOMOGRAPHY OF THE SKULL & NECK

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

## COMPUTED TOMOGRAPHIC FINDINGS

The tooth elements 105, 305, 311, 405 and 411 are absent.

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

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.

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.

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 anatomical structures of the neck reveal no abnormalities of the osseous and surrounding soft tissue structures, but mild spondylosis formation at the caudoventral aspect of C7.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Multiple absent teeth
- Normal brain
- Normal middle and inner ear
- Normal neck, but mild spondylosis formation caudal vertebral endplate C7

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals no clinically relevant abnormalities and an underlying cause for the presenting clinical signs cannot be specified. If not yet done so the workup may 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 other systemic illness. In case of the strong clinical suspicion of structural intraparenchymal changes an MRI may be considered.



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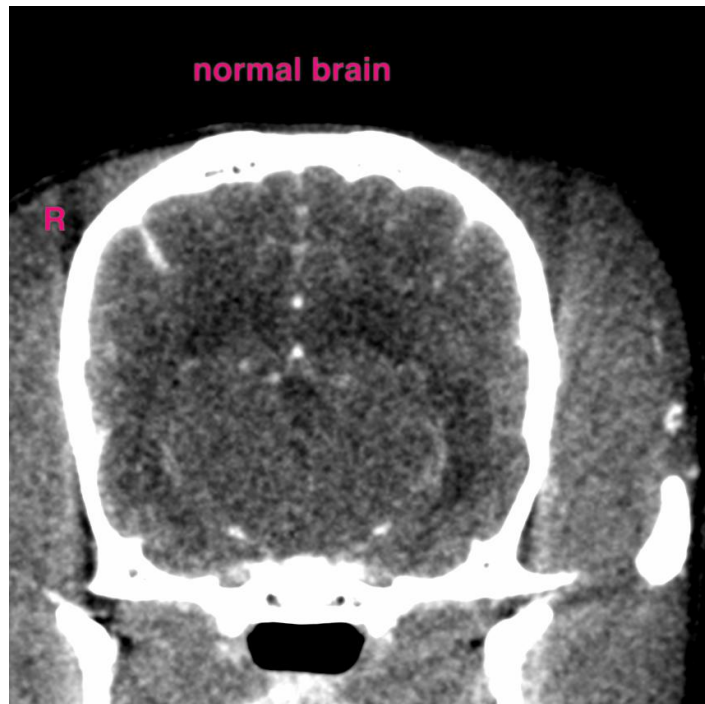
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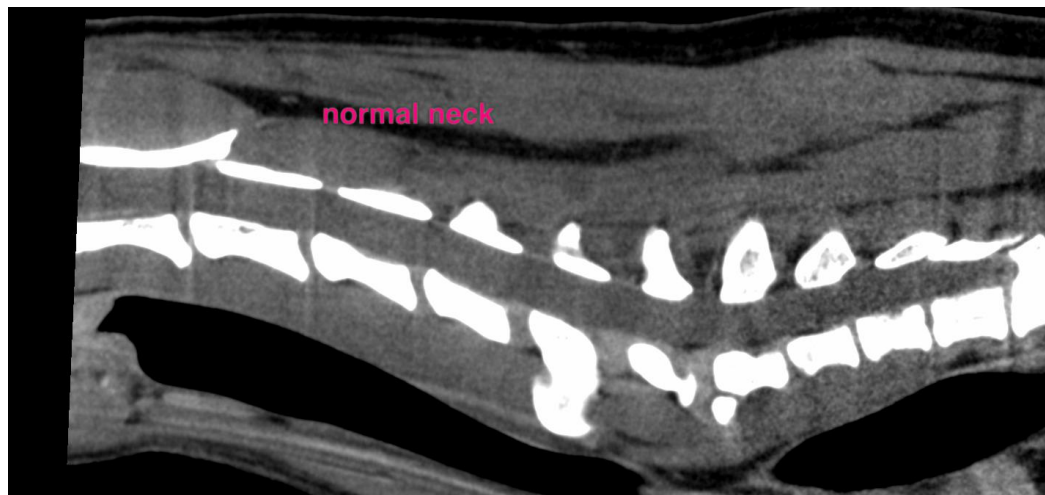
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
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