


**PATIENT PRESENTING CLINICAL SIGNS**

Helena Colon Patient begins to have episodes of seizures in the month of June. Her last episode was on October 20.  
 Meds: Keppra TID, Omeprazole SID, Clindamycin SID  
 Abnormal PE/Chem/CBC/UA Results: CBC --- NEU mild increased CHEM --- GLU mild increased and K mild decreased

**SPECIES**

Feline

**COMPUTED TOMOGRAPHIC STUDY OF THE SKULL**

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

**BREED**

Siamese

**COMPUTED TOMOGRAPHIC FINDINGS**

Triadan 307&407 present with resorptive lesions of the crown.

**SEX**

Spayed Female

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.

**AGE**

12 Years

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. Attached to the lateral surface of the left tympanic membrane, a small amount of non-contrast enhancing soft tissue material is appreciated.

**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.

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**

Veterinary Image  
 Center

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Dental resorptive lesions 307&407
- Suspect small amount of inspissated cerumen left ear canal
- Normal brain

**REFERRING VET**

Dr. M Miranda

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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

**INVOICE**

42414

If not yet done so the 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.

**DATE**

10/26/22



**PATIENT**

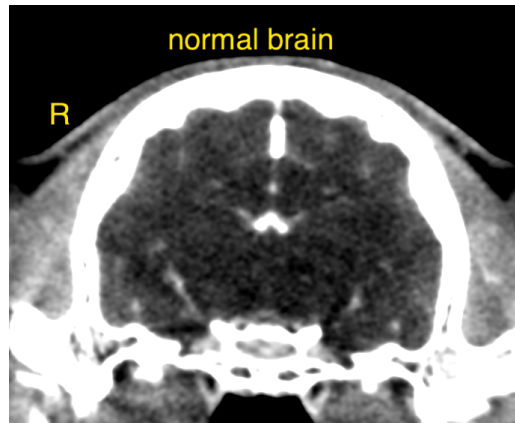
Helena Colon

**SPECIES**

Feline

**BREED**

Siamese



**SEX**

Spayed Female

**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.**

**AGE**

12 Years

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.

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

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

**HOSPITAL NAME**

Veterinary Image  
Center

**REFERRING VET**

Dr. M Miranda

**INVOICE**

42414

**DATE**

10/26/22