



**PATIENT PRESENTING CLINICAL SIGNS**

**Cielo Aquino** History: She has had several episodes of going stiff and unsteady on her feet, holding one limb up. Mentation: Bright, alert and responsive. Cranial nerve exam: No deficits noted. Gait/posture: Ambulatory with no ataxia or paresis. Postural reactions: Proprioceptive positioning and hopping were normal in all limbs. Spinal reflexes: Normal. Sensory/nociception: No hyperesthesia elicited with palpation along the vertebral column. DDX: Paroxysmal dyskinesia Atlantoaxial luxation with secondary intermittent cervical compression Epileptic seizure  
**Abnormal PE/Chem/CBC/UA Results:**

**BREED MAGNETIC RESONANCE IMAGING OF THE SKULL AND CERVICAL SPINE**

**Yorkie** T2 weighted, FLAIR, diffusion weighted, T1 pre- and post-gadolinium sequences in multiple imaging planes are provided for review.

**SEX MAGNETIC RESONANCE IMAGING FINDINGS**

**Spayed Female** The brain presents the expected anatomy and bilateral symmetry with normal signal intensity and contrast enhancement. There is no evidence of abnormal meningeal enhancement. A signal void is seen in the mesencephalic aqueduct.

**AGE**

**2 Years** The ventricular system presents the expected dimensions, morphology and the CSF signal is within normal limits in all sequences.

**INTERPRETED BY**

The right tympanic bulla contains a moderate amount of in fluid sensitive sequences hyperintense material.

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

Surrounding soft tissue structures in the head region are within normal limits.

**HOSPITAL NAME**

Mild dorsal angulation of the dens is seen, distorting the ventral subarachnoid space at the same level; no abnormalities of the spinal cord at the same level are appreciated.

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Level with C2 to C4, the central canal of the spinal cord is mildly dilated, measuring 1 mm in diameter.

**REFERRING VET**

The intervertebral disc C6/C7 is mildly protruding into the vertebral canal, mildly distorting the ventral epidural space at the same level. The intervertebral disc C6/C7 presents a moderate loss of the in fluid sensitive sequences hyperintense signal of the nucleus pulposus.

Dr. Marchal

**MAGNETIC RESONANCE IMAGING DIAGNOSIS**

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- Mild dorsal angulation of the dens axis
- Mild intervertebral disc protrusion and degeneration of the intervertebral disc C6/C7; no evidence of compressive myelopathy
- Right sided otitis media – suspect primary secretory and is considered as an incidental finding
- Structural normal brain

**DATE**

11/5/21



**PATIENT**

- Mild dilation of the central canal of the spinal cord, incidental
- No evidence of atlanto-axial instability

Cielo Aquino

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**SPECIES**

The MR study of the skull is negative for clinically relevant pathology.

Canine

The dorsal angulation of the odontoid peg is only mild and the spinal cord at the same level presents without signs impingement of the spinal cord; the dorsal angulation of the odontoid peg is considered clinically not relevant.

**BREED**

Yorkie

**SEX**

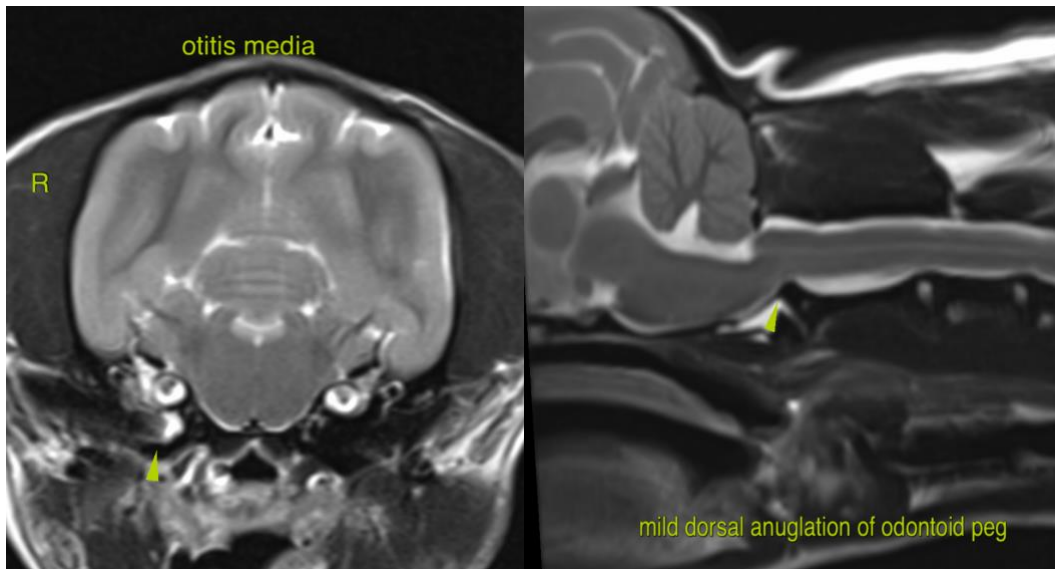
Spayed Female

**AGE**

2 Years

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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.**

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.

**REFERRING VET**

Dr. Marchal

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

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**PATIENT**

Cielo Aquino

**SPECIES**

Canine

**BREED**

Yorkie

**SEX**

Spayed Female

**AGE**

2 Years

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