



PATIENT PRESENTING CLINICAL SIGNS

PATIENT
Mowgli Olesen

SPECIES
Canine

BREED
Labrador Retriever

SEX
MN

AGE
4 Years

INTERPRETED BY
Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

Mowgli, a 5 year old, MN Labrador Retriever, presented to the AHP Neurology Service on December 22, 2021 for evaluation of potential brain tumor based on CT. Mowgli had previously been a normal dog but for about a month prior to onset of his other signs (Dec 8th), he would have odd moments of aggression when playing with other dogs. He was also strange/growling/looking oddly at some people visiting the house over that time. On December 8th, he seemed a bit more tired and wanted to get into the bedroom more. When he would turn, he would whimper. This got better over a few days although he was still a little more tired. On Dec 16, when camping near Algonquin park, while walking, he stopped, closed his eyes, head swaying back and forth and seemed disoriented. He was tired and struggling to walk. He was examined at the vet hospital, he was stressed, bloodwork was performed and was normal and he was started on metacam due to concern for pain. He continued to be extremely lethargic and less alert/engaged. He would sleep almost all the time. When roused to go out to eliminate, he would have these episodes again when he would freeze and have a head sway. Antibiotics (Clavasepten) was started at that time. On Dec 19, things declined further. He was panting heavily, he was crying in pain and his tongue seemed blue and he was more disoriented. He was brought to the 404 ER. A CT scan was performed and identified pathology in the right frontal lobe region. Lymph nodes were also increased in size. Gabapentin and levetiracetam were prescribed.

Abnormal PE/Chem/CBC/UA Results:

MAGNETIC RESONANCE IMAGING OF THE SKULL

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

MAGNETIC RESONANCE IMAGING FINDINGS

Level with the right frontal lobe, a moderate to marked plaque like thickening (up to 6.5 mm in width) of the meningeal lining is seen presenting multiple cavitated regions. The right frontal lobe is mildly distorted by the mass effect. Post contrast administration there is strong contrast enhancement of the plaque like thickened meningeal region and generalized moderate meningeal thickening along the frontal, parietal and temporal lobe bilaterally as well as the falx cerebri is seen - R>L. There is evidence of extension of thickened contrast enhancing meninges into the sulci. Level with the occipital lobe, normal width of the meningeal lining is seen.

REFERRING VET
The tympanic bullae are aerated, and the bony lining is thin.

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

MAGNETIC RESONANCE IMAGING DIAGNOSIS

- Generalized pachymeningeal thickening with evidence of leptomeningeal involvement, most accentuated level with the right frontal lobe

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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The generalized moderate to marked thickening of the pachy- and leptomeninges with cystic lesions is concerning for neoplastic transformation such as round cell tumor, leptomeningeal oligodendrogliomatosis, en plaque meningioma (but the diffuse distribution is atypical).



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Eosinophilic meningitis or idiopathic hypertrophic pachymeningitis are considerations, but the leptomenigeal involvement is atypical in idiopathic hypertrophic pachymeningitis; meningitis of infectious origin is considered unlikely due to the diffuse distribution of the meningeal changes. If not done so yet, complementing workup by a CSF tap is recommended. Based on the results of the CSF tap, empirical management can be tried – e.g. Cytaraboside.

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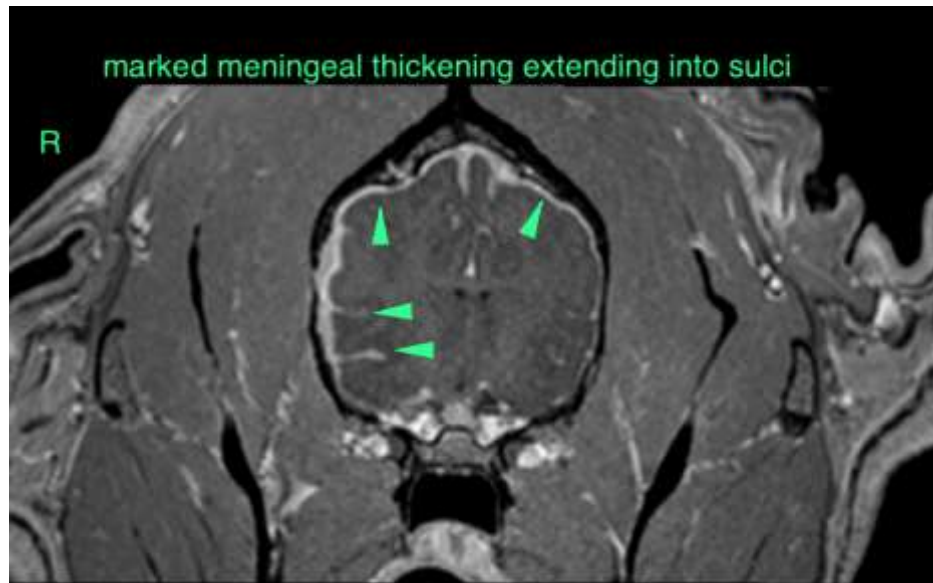
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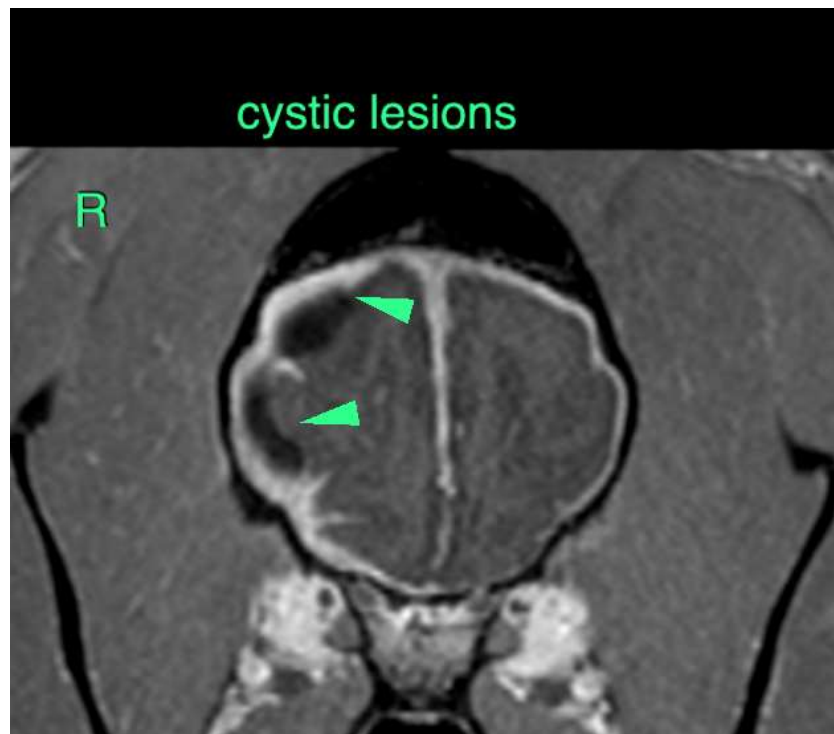
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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