



PATIENT

Broco Morales

SPECIES

Canine

BREED

Shih Tzu

SEX

NM

AGE

7Y

WEIGHT

5.1lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

José L. Alvarado Bruno
(CVT) - CT Scan
Technician

HOSPITAL NAME

Veterinary Image
Center

REFERRING VET

Dr. H. Martinez, DVM

INVOICE

73905

DATE

2-23-26

PRESENTING CLINICAL SIGNS

- Patient presented for medical evaluation for neck pain since 1/9/2026. On recheck patient is not improving. On 2/4/2026 patient presented for generalized ataxia and possible seizures.
- Meds --- Prednisolone Susp 3mg/mL: 0.4mL PO EOD x7d, Gabapentin Susp 100mg/mL: 0.2mL PO EOD x7d... no improvement
- Patient has history of heartworm disease.
- The owner reports a possible trauma that occurred on 12/25/2025 due to a fall from a 6-foot-high fence. It was after this event that the patient began to show symptoms of pain.

Abnormal PE/Chem/CBC/UA Results: CBC --- HGB low (12.3), RETIC-HGB low (21.4), RBC low (5.37), HCT low (35.3), WBC high (29.76), MONO high (2.31), NEU high (25.12) CHEM --- ALKP high (292), ALT high (456), CREA low (0.4), GGT low (22)

COMPUTED TOMOGRAPHY OF THE SKULL, NECK, THORAX AND ABDOMEN

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

COMPUTED TOMOGRAPHIC FINDINGS

Skull & Neck

Multiple teeth are absent. The remaining teeth present generalized periodontal disease - most pronounced triadan 201, 203, 209, 101, 109, 405, 407, 301-303, 305, 308, 308, 310 and 311.

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 osseous and soft tissue structures of the neck reveal no abnormalities.

Thorax

The bony and surrounding soft tissue structures are within normal limits. The thoracic spine reveals no abnormalities.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.



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The lung parenchyma presents the expected architecture and attenuation behavior.

Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.

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Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

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Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration, a bilaterally symmetric and uniform nephro- and pyelogram is noted.

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The adrenal glands are within normal limits for size, shape and organ architecture.

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

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The pancreas is evenly contoured; the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

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The bony and surrounding soft tissue structures reveal no abnormalities. The lumbar spine is unremarkable.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Generalized periodontal disease, most accentuated 101, 109, 201, 203, 209, 301-303, 305, 308, 308, 310, 311, 405, 407
- Normal neck and cervical spine
- Normal thorax and thoracic spine
- Normal abdomen and lumbar spine

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals no abnormalities, that do explain the described neck pain, there is no evidence of extradural myelocompression. Workup can be complemented by a myelographic CT study or MRI study to screen for isoattenuating extradural material or intradural pathology.

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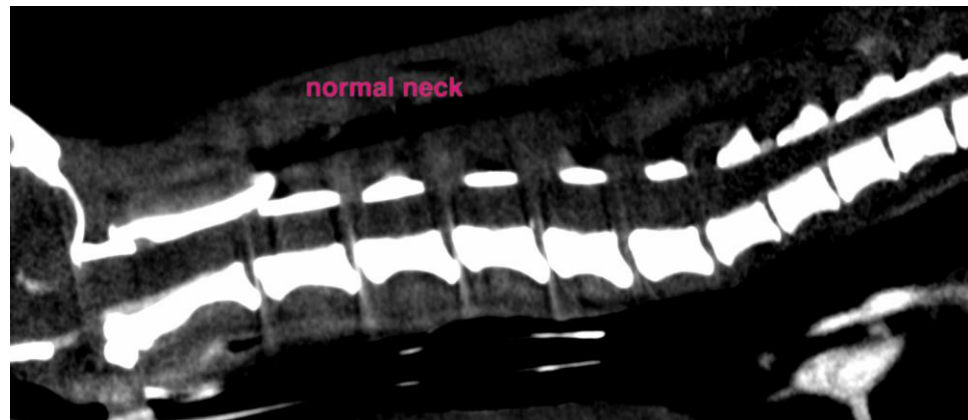
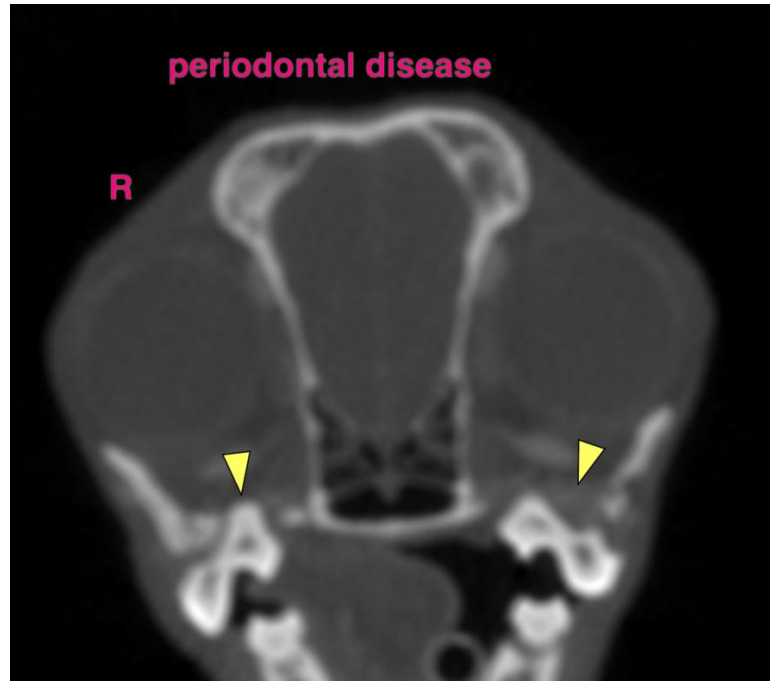
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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info@sonopath.com