



PATIENT PRESENTING CLINICAL SIGNS

Kevin Chapeau Presented for vomiting and diarrhea and was in shock and was then diagnosed with atypical Addison's disease. In hospital had an event consistent with a generalized seizure. Has been reportedly neurologically normal. Previous bilateral enucleations

SPECIES Abnormal PE/Chem/CBC/UA Results: Neurological exam difficult to interpret due to debilitated state but is tetraparetic, stuporous and unable to ambulate independently.

Canine

MAGNETIC RESONANCE IMAGING OF THE SKULL

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

Mixed Breed Small

MAGNETIC RESONANCE IMAGING FINDINGS

SEX The brain presents a mild decreased volume. In T2 weighted images, multiple small hypoattenuating foci are noted throughout the brain parenchyma. In the susceptibility weighted images, multiple susceptibility artefacts are seen through the telencephalon, measuring up to 2 mm in size. The lateral and third ventricle are moderately dilated, including the quadrigeminal cistern. The corpus callosum is deviated dorsally and the fornix is displaced ventrally. The interthalamic adhesion presents a mild irregular shape. The rostral contour of the cerebellum is flattened

MN

AGE

Reported 7 Years Old but may be older (rescue)

Post contrast administration no pathological distribution or contrast enhancement or meningeal enhancement is appreciated.

INTERPRETED BY

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

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The ocular bulbs bilaterally are absent.

Multiple teeth are absent.

HOSPITAL NAME

MAGNETIC RESONANCE IMAGING DIAGNOSIS

Animal Health Partners

- Multifocal randomly distributed intraaxial hemorrhage throughout the telencephalon
- Hydrocephalus internus with signs of mild hypertension
- History of bilateral enucleation
- Multiple absent teeth

REFERRING VET

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Kilburn

The findings are consistent with multifocal intraparenchymal microbleeds presenting a potential source for the recent seizure activity. Rule out systemic hypertension (e.g. cardiac disease, pheochromocytoma) ± cerebral amyloid angiopathy, coagulopathy, angiotropic lymphoma, Angiostrongylus infection. As metastasis such as hemangiosarcoma is a consideration as well, rule out primary neoplastic disease.

INVOICE

50649

The hydrocephalus is likely chronic and the clinical relevance for the acute clinical signs is unclear.

DATE

3-1-22



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Kevin Chapeau

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Mixed Breed Smal

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REFERRING VET

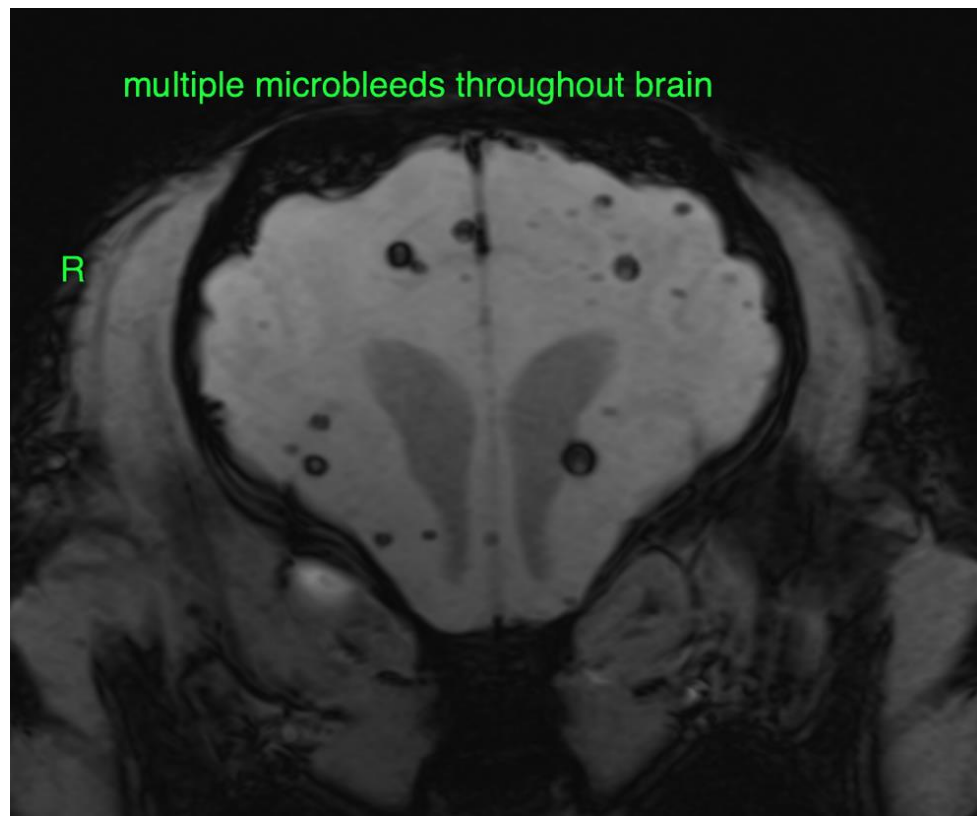
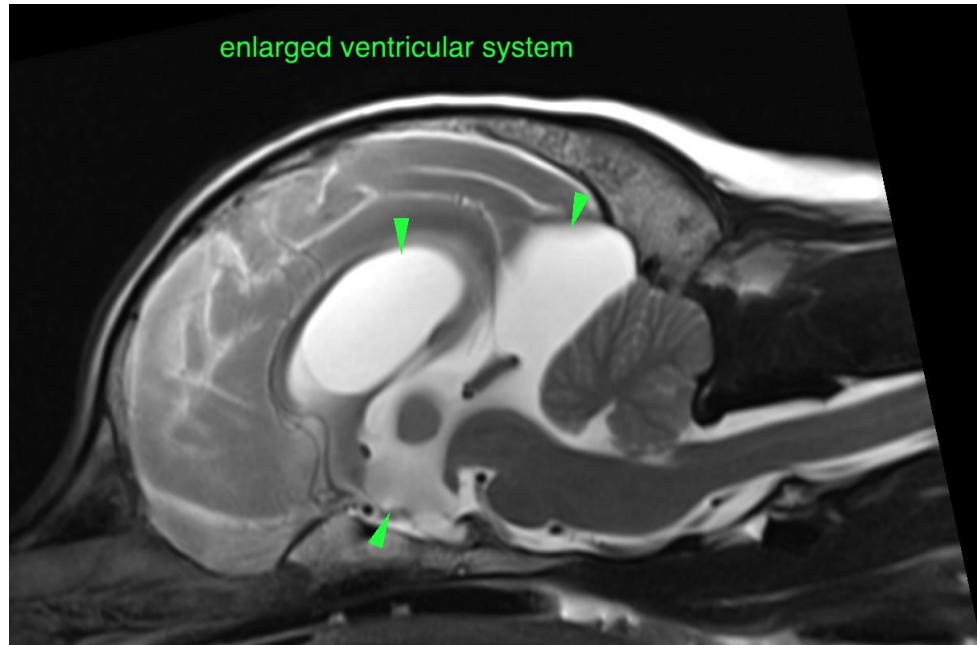
Kilburn

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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.

BREED

Mixed Breed Smal

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
sebast.schaub@gmail.com

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