



PATIENT

Nebula Matos

SPECIES

Canine

BREED

Miniature Pinscher

SEX

SF

AGE

6Y

WEIGHT

15.0lbs

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

74123

DATE

3-10-26

PRESENTING CLINICAL SIGNS

- The patient presents for medical evaluation due to episodes of seizures and generalized ataxia. The patient has a history of seizures for the past two years.
- Current medications include phenobarbital BID, levetiracetam BID, and potassium bromide SID.
- The patient is currently not responding to the prescribed treatment.

Abnormal PE/Chem/CBC/UA Results: CBC --- unremarkable CHEM --- unremarkable

COMPUTED TOMOGRAPHY OF THE SKULL & NECK

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

COMPUTED TOMOGRAPHIC FINDINGS

The tooth element 205 is absent. Triadan 101, 102 and 201 present a transverse fracture level with the dental neck.

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 contain a small volume of gravity dependent, fluid attenuating material. 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 dorsal aspect of the right parietal bone presents a focal geographic, mild expansile osteolytic lesion with mild outward deviation of the dorsal cortex; measuring 5 mm in diameter.

The right medial retropharyngeal lymph node is enlarged, measuring 2.1 x 1.4 x 3.7 cm; the surrounding fat presents mild to moderate soft tissue striation and along the fascial planes increased contrast uptake is appreciated.

The thyroid glands present the expected size, shape and attenuation behavior.

The remainder of the osseous and soft tissue structures of the neck are within normal limits.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Lymphadenopathy right medial retropharyngeal lymph node with surrounding cellulitis
- Monostotic benign appearing osteolytic lesion expansile osteolysis dorsal aspect right parietal bone
- Complicated dental fracture 101, 102 and 201
- Mild bilateral otitis media
- Absent triadan 205
- Normal brain



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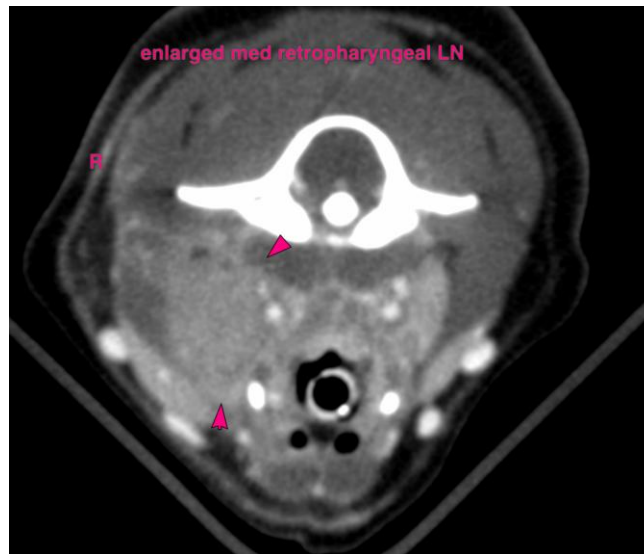
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The main finding is the enlargement of the right medial retropharyngeal lymph node along with the surrounding cellulitis – the finding can present reactive lymphoid hyperplasia or neoplastic infiltration (e.g. round cell tumor, carcinoma). Recommend FNA sampling of the affected lymph node for specification.

The mild expansile osteolytic lesion of the right parietal bone presents predominant benign image features and the odds for traumatic origin, fibrous dysplasia or osseous granuloma are high. However, round cell tumor or early stage of sarcoma are possible. FNA sampling may be tried for specification.





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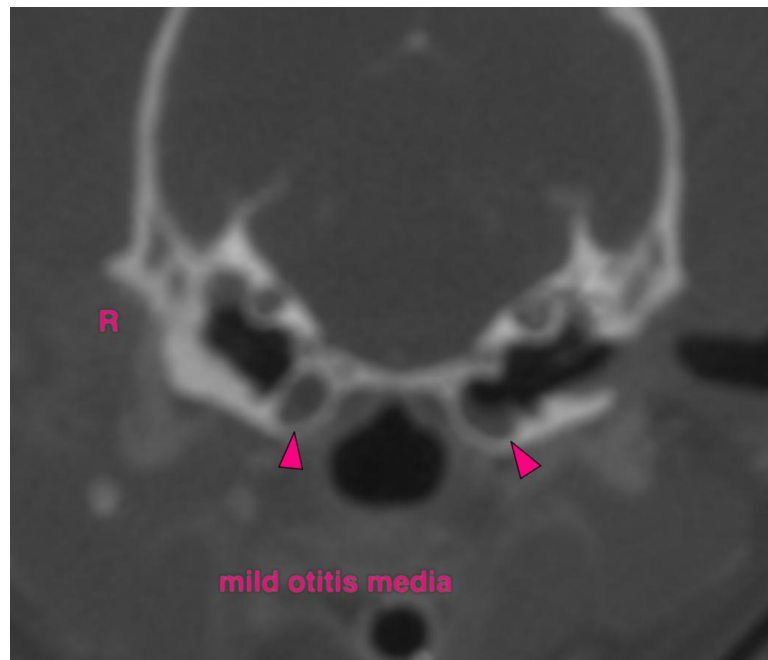
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com