



PATIENT PRESENTING CLINICAL SIGNS

Miles Carter Rescued about 1.5 years ago. Presented about 10 days ago for prolapse third eyelid and facial drooping, suspect Horner's.
 Abnormal PE/Chem/CBC/UA Results: Elevated third eyelid and droopy lower eyelid OD.
 Radiographs and ultrasound report are attached.

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL

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

BREED

Golden Retriever

COMPUTED TOMOGRAPHIC FINDINGS

The pictured parts of the dentition are complete and unremarkable in all jaw quadrants.
 The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

SEX

Neutered Male

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

AGE

~6-7 Years

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.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

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.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Normal skull
- No evidence of otitis media

HOSPITAL NAME

Mobile Pet Imaging

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Meaux

The current CT study fails to present an underlying macromorphological abnormality that can explain the history of right sided Horner's syndrome. Rule out other causes for facial nerve paralysis like hypothyroidism, polyneuropathy, thoracic pathology or idiopathic facial nerve paralysis. The latter is the most common cause for facial nerve paralysis with 75% of the cases in dogs.

In case of strong clinical suspicion for intraparenchymal lesions of the brain, an MRI study may be beneficial for further workup.

INVOICE

51611

DATE

4-19-22



PATIENT

Miles Carter

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.

SPECIES

Canine

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

BREED

Golden Retriever

SEX

Neutered Male

AGE

~6-7 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Meaux

INVOICE

51611

DATE

4-19-22