



PATIENT

CocoMochaBean
Rotigel

PRESENTING CLINICAL SIGNS

CocoMochaBean presents to MVCT for a CT scan of the skull, thorax and abdomen. CocoMochaBean has an acute onset of neurological incidents. Within the past 3 months has had Nystagmus, Ataxia, dilation of pupils, and widened stance in hind legs all lasting about 5-30 minutes.

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: NSF on Chemistry and CBC

BREED

Siamese

COMPUTED TOMOGRAPHY OF THE SKULL, THORAX AND ABDOMEN

A pre- and post-contrast CT study of the skull, thorax and abdomen in a soft tissue reconstruction are provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Skull

Multiple teeth are absent.

SEX

MN

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

AGE

14

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

Both tympanic bullae are filled with non-contrast enhancing soft tissue material. Moderate thickening of the mucosal lining of the tympanic bullae is appreciated. The osseous lining of both tympanic bullae is smooth and thin. The external ear canals are within normal limits.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

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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.

Thorax

REFERRING VET

Seely Rotigel, DVM

The bony and surrounding soft tissue structures are within normal limits.

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.

INVOICE

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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.

DATE

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The lung parenchyma presents the expected architecture and attenuation behavior, with regions of plate like atelectasis of the ventral aspects of the lung.

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



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Abdomen

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

A separate right & left caudal vena cava of the pre-renal and renal segment is noted.

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Both kidneys present a concave depression of the lateral surface and post contrast administration, a wedge shaped mild hypoattenuating zone of the renal parenchyma at the same level is appreciated.

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

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

The portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.

SEX

MN

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.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Bilateral otitis media
- Regions of plate-like atelectasis ventral aspects of the lung, incidental
- Chronic renal infarction bilaterally
- Double caudal vena cava, pre-renal & renal segment
- Spondylosis deformans

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The bilateral otitis media can be associated with vestibular clinical signs. Correlate with presenting neurological clinical signs – peripheral versus central vestibular disease. If there is strong clinical suspicion for intraparenchymal lesions of the CNS, complementing workup by a MRI study might be beneficial.

REFERRING VET

Seely Rotigel, DVM

The atelectatic regions of the lung are considered incidental, there are no signs for pneumonia.

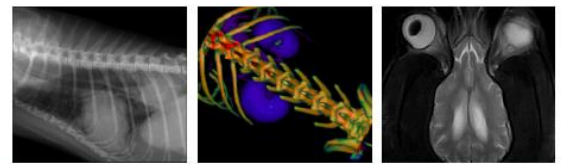
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The abdomen presents without relevant pathology.

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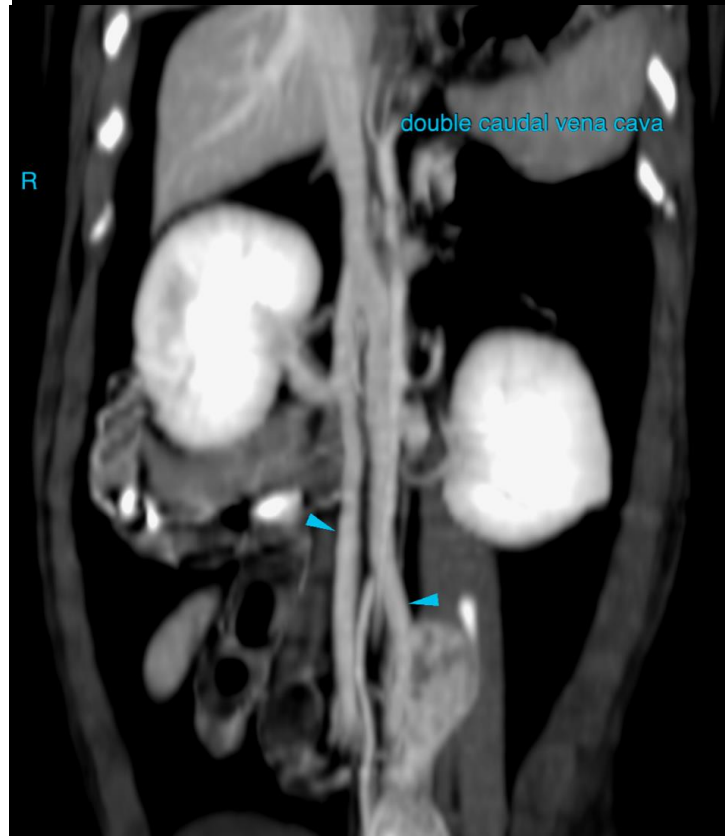
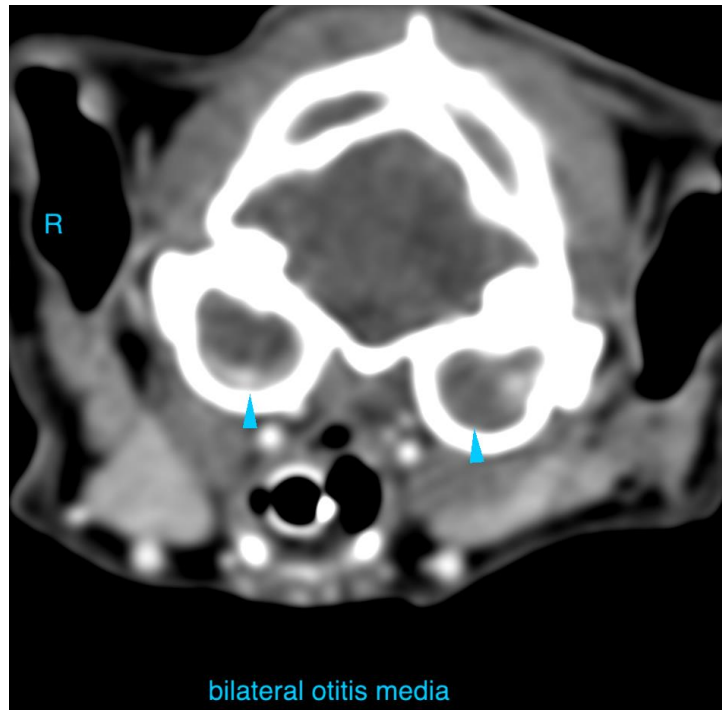
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Feline

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.

BREED

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