



PATIENT PRESENTING CLINICAL SIGNS

Rayni Dawes
SPECIES Canine
BREED American Cocker Spaniel
SEX Female
AGE 3

Recheck phenobarbital level shows that her plasma phenobarbital level is at the low end of the optimal therapeutic level at 20. We are going to bump the dose up a bit. If she still has frequent seizures despite this dose increase, then we will need to consider adding a 2nd anticonvulsant drug to her treatments. CBC and chemistry panel are normal aside from very mild anemia. UA shows no obvious UTI. Her urine is well concentrated. We ran a pre and post prandial bile acids test to asses for liver dysfunction and vascular anomalies, as these types of conditions can cause seizure disorders. This shows normal values. We discussed brain imaging with MRI (better) or pre and post contrast CT scan to assess for tumor or other structural problem of Rayni's brain that could cause her to have seizures.

COMPUTED TOMOGRAPHY OF THE SKULL

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

COMPUTED TOMOGRAPHIC FINDINGS

A supernumerary triadan 205 is appreciated.

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.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Supernumerary 205
- Structural normal brain

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

In the present study of the brain there is no evidence of macromorphological disease, which supports the presumptive diagnosis of idiopathic epilepsy.

If not yet done so the workup should be complemented by examination of CSF to screen for brain disease that is not necessarily associated with structural changes of the brain parenchyma. In case of the strong clinical suspicion of structural intraparenchymal changes an MRI may be considered.

INVOICE 52466

DATE 6-15-22

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

HOSPITAL NAME

Southern Oregon
 Veterinary Specialty
 Center

REFERRING VET

Kimberly Winters



PATIENT

Rayni Dawes

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Spaniel

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INTERPRETED BY

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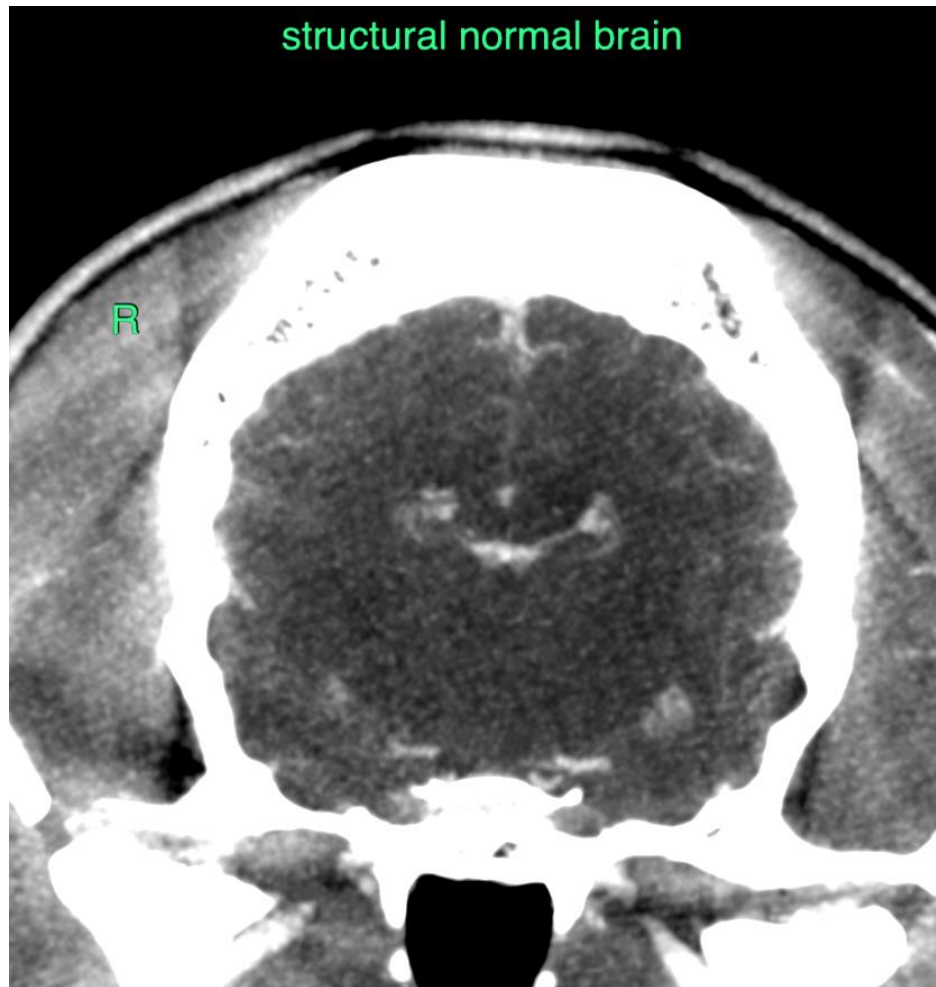
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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