



PATIENT

Maizy O'Brien

PRESENTING CLINICAL SIGNS

Patient presented for acute seizures.
Abnormal PE/Chem/CBC/UA Results: Glucose of 180 ALT 141 Amylase 480

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL, THORAX AND ABDOMEN

A high resolution pre- and post-contrast CT study of the skull and abdomen and a post-contrast CT study of the thorax are provided for review.

BREED

Boston Terrier

COMPUTED TOMOGRAPHIC FINDINGS

Regarding the anatomy, electronic side markers are flipped, and R is indicating the left side of the patient and vice versa.

Skull

SEX

Female Spayed

Multiple teeth are absent.

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

AGE

8 Years

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

Post contrast administration, level with the left occipital lobe, at the left lateral aspect of the falx cerebri an irregular ovoid shaped, faint contrast enhancing lesion measuring approximately 14 x 10 x 13 mm in size is appreciated. The falx cerebri is mildly deviated to the right by the mass effect.

HOSPITAL NAME

Animal Emergency
Hospital Volusia

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.

Level with the intervertebral disc space C2/C3, mineralized disc material is protruding into the vertebral canal, occupying approximately 5-10% of the cross-sectional area of the vertebral canal at the same level and distorting the ventral epidural space.

REFERRING VET

Dr. Carver

Thorax

Mild spondylosis formation is seen along the vertebral endplates of the lumbosacral junction.

INVOICE

52590

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.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

DATE

6-26-22

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.

The lung parenchyma presents the expected architecture and attenuation behavior, but regions



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of compression atelectasis of the dependent aspects of the lung parenchyma.

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

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Abdomen

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

BREED

Boston Terrier

Both kidneys present within normal limits for size, shape and organ architecture. A small amount of mineral attenuating material is associated with the renal pelvis bilaterally. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

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

SEX

Female Spayed

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.

AGE

8 Years

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

- Intracranial – suspect intraaxial – faint contrast enhancing mass left parietal lobe
- Mild intervertebral disc protrusion C2/C3 with possible dynamic compressive myelopathy
- Multiple absent teeth
- Mild nephrolithiasis without evidence of obstruction
- Spondylosis deformans
- No evidence of pulmonary metastatic disease

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is an intracranial mass that appears to be intraaxial and potentials include neoplasia (e.g. glioma, lymphosarcoma) or inflammation (e.g. granuloma, (GME)). An extraaxial mass is consideration as well – such as meningioma. If it is therapeutical relevant, MRI can be used for further definition. The intracranial mass is a plausible explanation for the seizure activity.

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The thorax and abdomen present without clinically relevant pathologies.

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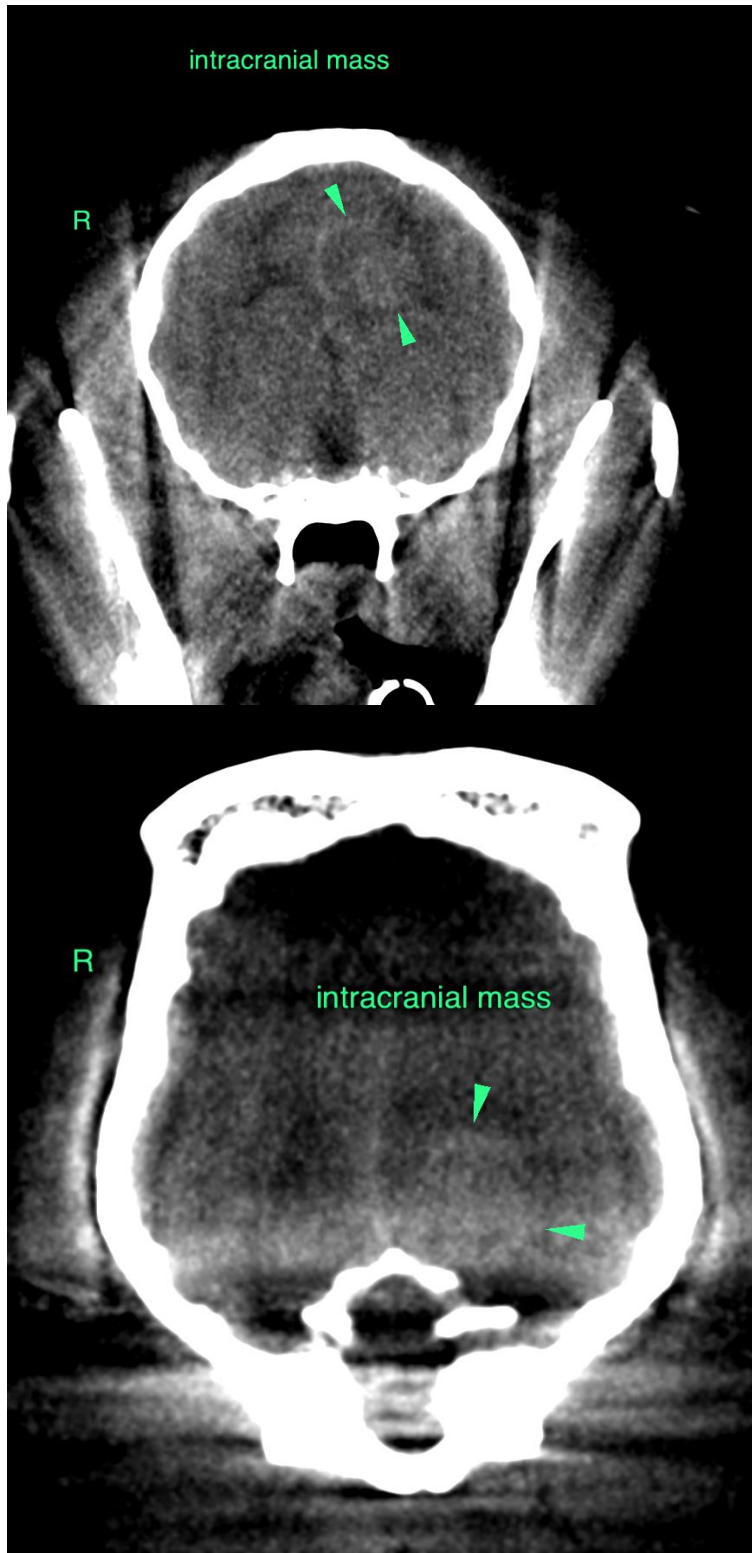
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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