



PATIENT PRESENTING CLINICAL SIGNS

Tetch Bird Referral patient- presented to rDVM 2 weeks ago for lethargy, swollen joints, and fever. Diagnosed with Lyme and Anaplasma, sent home with Doxycycline gabapentin carprofen and patient improved for 9 days then declined. Presented today lame on right side, lethargic, not eating, acting neurologic

SPECIES Abnormal PE/Chem/CBC/UA Results: Tetraparesis, more on the right side, front and back, concerned for possible central disease on the brain: infection vs. inflammation (meningitis).

Canine

COMPUTED TOMOGRAPHY OF THE SKULL AND ENTIRE SPINE

A high resolution pre- and post-contrast CT study of the skull and cervical, thoracic & lumbar spine are provided for review.

BREED

French Bulldog **COMPUTED TOMOGRAPHIC FINDINGS**

Skull

SEX A supernumerary triadan 102 is present. Triadan 106, 109, 206 and 209 present a widened periodontal space. Rotation of the maxillary premolar teeth is appreciated.

Male

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

AGE

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

4 Years, 7 Months

INTERPRETED BY

Both tympanic bullae contain soft tissue material; the osseous lining is breed related thickened and smooth. The external ear canals are within normal limits.

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

Multifocal throughout the parenchymal of the telencephalon bilaterally – including the left frontal lobe, right & left parietal lobe and right occipital lobe, mild peripheral contrast enhancing, variable sized lesions are visible. The volume of the parenchyma of the respective lobes of the brain is increased, distorting the lateral ventricles bilaterally.

HOSPITAL NAME

Catskill Veterinary Services, PLLC

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.

Spine

REFERRING VET

Dr. Joseph D'Abbraccio

The intervertebral disc C4/C5 is mildly bulging into the vertebral canal, distorting the ventral epidural space at the same. Multiple intervertebral discs along the cervical spine present mild central punctuate mineralization. The remainder of the osseous and soft tissue structures of the cervical spine are within normal limits.

T6 to T11 present as hemivertebra with multifocal mild spondylosis formation.

INVOICE

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Level with the intervertebral disc spaces L2/L3, L3/L4 to L7/S1, disc material is bulging into the vertebral canal, most accentuated level with the lumbosacral junction occupying between 10 to 50% of the cross-sectional area of the vertebral canal at the same level.

The patella of both stifle joints is seen at the craniomedial aspect of the medial femoral condyle. The femoral trochlear groove is shallow.

DATE

7-13-23

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Multifocal asymmetrically distributed mild contrast enhancing intraaxial lesions throughout



PATIENT

Tetch Bird

- the telencephalon
- Intervertebral disc protrusion L6/L7 and L7/S1 with likely dynamic compression of the caudal equina fibers
- Intervertebral disc protrusion L2/L3 to L5/L6

SPECIES

Canine

- Bilateral medial patellar luxation
- Periodontal disease 106, 109, 206 and 209
- Multiple absent teeth
- Supernumerary triadan 102
- Bilateral otitis media – likely primary secretory

BREED

French Bulldog

- Multiple hemivertebra along the thoracic spine
- Multifocal mild chondroid disc degeneration

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Male

The appreciated intraaxial brain lesions are highly suggestive for encephalitis and both meningoencephalitis of unknown origin (e.g. granulomatous meningoencephalitis) or granulomatous infectious encephalitis (e.g. mycotic) need to be considered. No clinically relevant abnormalities of the spine are appreciated in the current CT study, however accompanying meningomyelitis is a potential. If not done so yet, recommend complementing workup by a CSF tap.

AGE

4 Years, 7 Months

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REFERRING VET

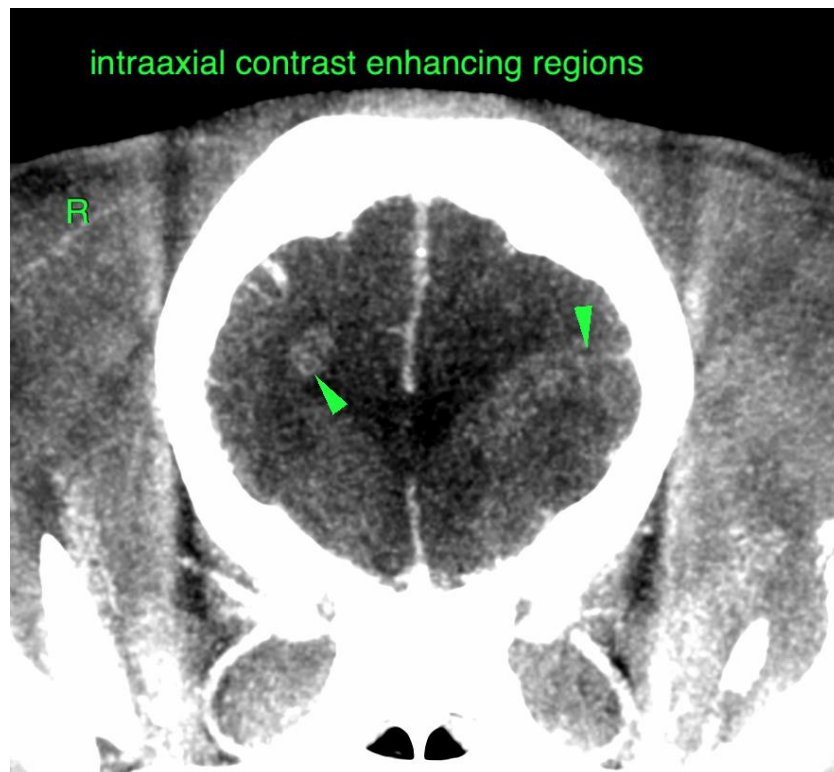
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PATIENT

Tetch Bird

SPECIES

Canine

BREED

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SEX

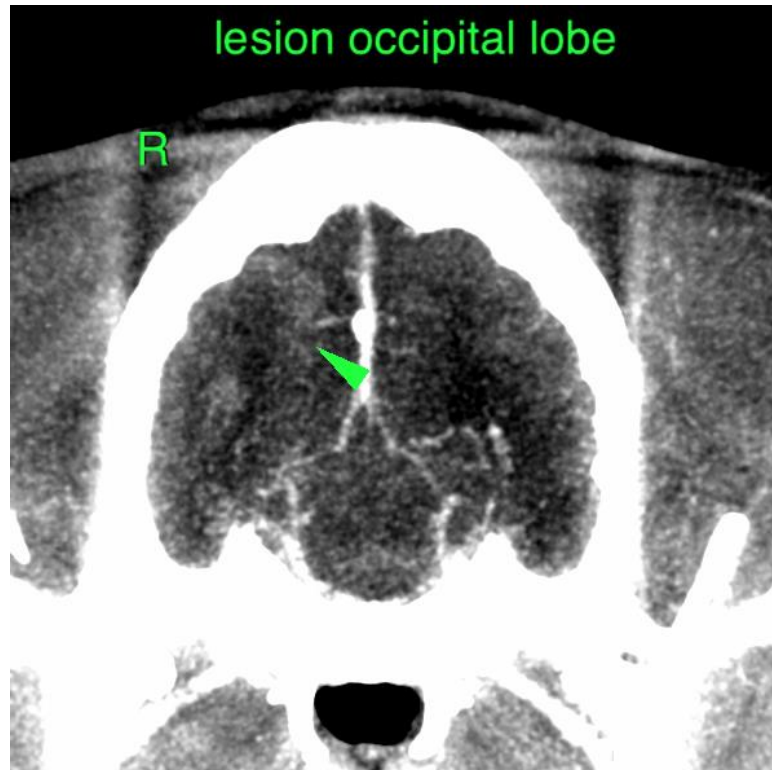
Male

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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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