



PATIENT

Huey ProudPup
Rescue

PRESENTING CLINICAL SIGNS

Chronic history of neck pain and refusal to lift head. Cries out on palpation and dorsoflexion of head.

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL

A pre- and post-contrast CT study of the skull in a bone and soft tissue reconstruction is provided for review.

BREED

Cavapoo

COMPUTED TOMOGRAPHIC FINDINGS

The deciduous teeth and tooth buds presents without abnormalities.

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

SEX

M

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.

AGE

12 Weeks

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.

HOSPITAL NAME

Bluegrass Veterinary
Specialists

C1 is partially fused with the occipital bone. C1 is in a relative cranial position and the odontoid peg is protruding through the foramen magnum into the caudoventral aspect of the cranial fossa; kinking of the medulla oblongata at the same level is appreciated.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Atlantooccipital fusion (occipitalization) of the atlas
- Secondary abnormal cranial position of the odontoid peg of C2

REFERRING VET

Jude

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study is consistent with congenital malformation of the craniocervical junction, and the atlas is partially fused to occipital bone with secondary malposition of the C2 – especially of the odontoid peg – protruding into the cranial fossa. The finding is a plausible explanation for the presenting clinical signs. Potential palliative surgical options might be discussed with neurologist. The prognosis is guarded.

INVOICE

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DATE

7-28-22



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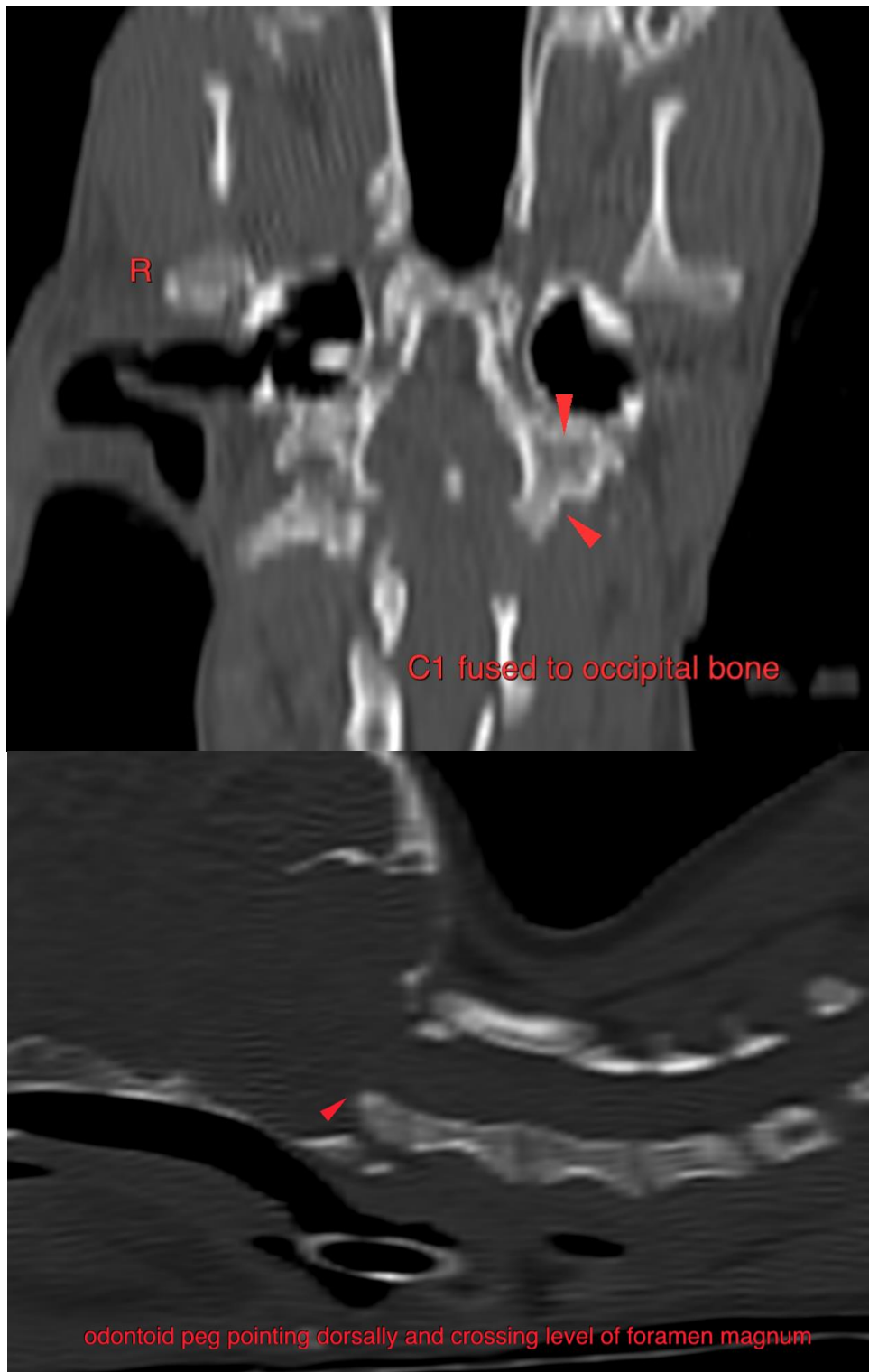
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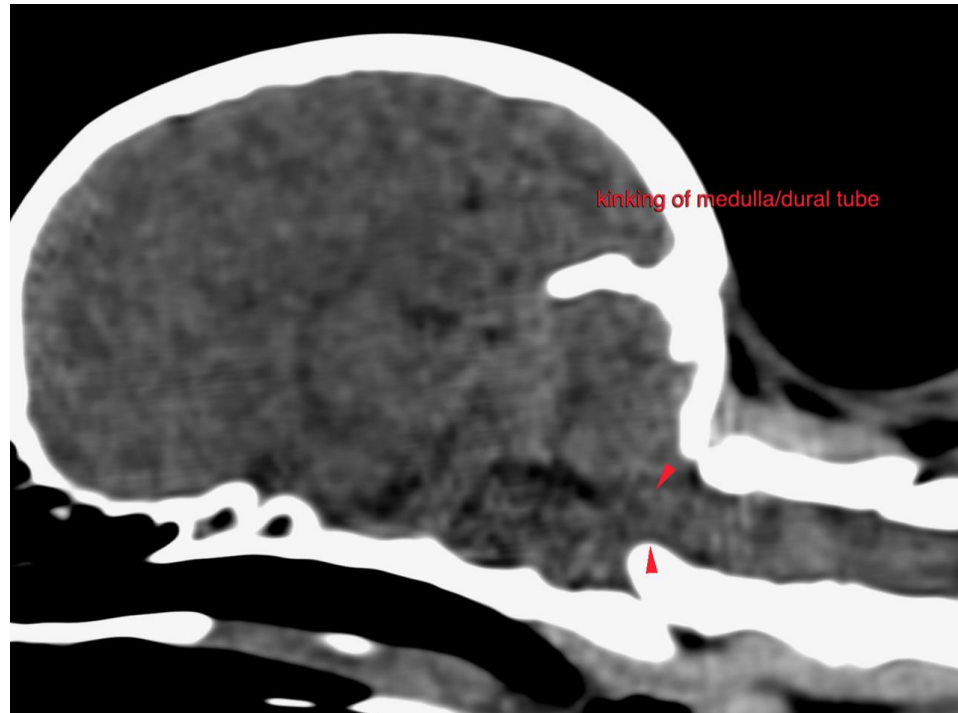
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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