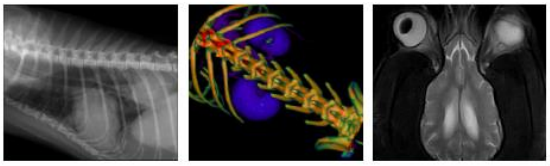

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Frankie Waker

SPECIES

Canine

BREED

Staffordshire Bull Terrier

SEX

Neutered Male

AGE

10

INTERPRETED BY

Sebastian Schaub, DVM Dr. med. vet. DipECVDI

HOSPITAL NAME

Advanced Veterinary Imaging

REFERRING VET

Dr. Henry

INVOICE

24002

DATE

8/19/23

PRESENTING CLINICAL SIGNS

History: unavle to close jaw neuro: no cp deficit, no ataxia cranial nerve: menace normal, no sign of nystagmus or strabismus, facial sensation normal both side. palpebral reflex normal. swallow and gagging reflex normal. facial symmetry, likely L side mild atrophy? mouth: partially opened lower jaw with motor function Able to cloes the mouth easily, no pain manipulating the mouth, TMJ normal. no intraoral swelling / suspecting abscess. L horners: miosis, prolapsed TED, and slightly eyeball retraction, fluo stain -ve Abdominal: comfortable and no mass felt ears: wnl
Abnormal PE/Chem/CBC/UA Results: t4 low chem/hem normal

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL

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

COMPUTED TOMOGRAPHIC FINDINGS

The tooth element 208 is absent.

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 lateral ventricles of the brain are asymmetric, R<L.

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

- Absent triadan 208
- Asymmetry lateral ventricles of the brain - incidental
- Normal brain and no abnormalities along the course of the trigeminal nerve bilaterally

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals no abnormalities, explaining the 'drop-jaw' and the presumptive diagnosis is trigeminal nerve neuropathy (e.g. neuritis) – commonly idiopathic in origin.

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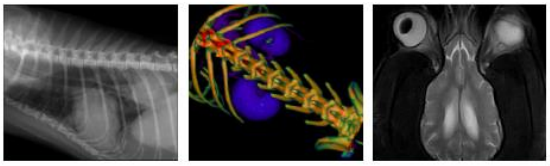

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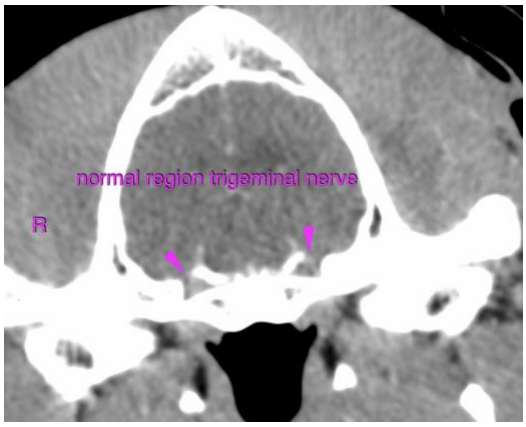

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com