


**PATIENT PRESENTING CLINICAL SIGNS**

Mandy Young Suspect right forebrain dz vs secondary to vascular accident/clot formation  
 Physical Examination: Body Condition Score: 3/5 Hydration Status: wnl Integument: clean Eyes: normal plr, normal menace  
 Ears: clear AU Nose: nad Throat: nad Oral: stage 2, pink mm Cardiovascular: grade 4 murmur, normal pulses  
 Respiratory: clear eupneic Abdomen: soft Genitourinary: Female Spayed: Musculoskeletal: can't stand and walk  
 Neurologic: falls to the right, head tilt right, no nystagmus, can't assess cp's p  
 can't stand, reflexes and deep pain intact Lymph Nodes: wnl Rectum: not performed

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC STUDY OF THE SKULL**
**BREED**

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

Mini Poodle

**COMPUTED TOMOGRAPHIC FINDINGS**
**SEX**

The slice thickness is 10 mm, resulting in significant partial volume averaging with blurring especially of the osseous structures.

Spayed Female

Multiple teeth are absent.

**AGE**

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

15 Years

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

**INTERPRETED BY**

 Sebastian Schaub,  
 DVM Dr. med. vet.  
 DipECVDI

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.

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The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is &lt; 0.5, the attenuation and contrast enhancement pattern is uniform.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**
**REFERRING VET**

Dr. Gerards

- Multiple absent teeth
- Normal brain

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44505

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

An underlying macromorphological cause of the described acute clinical signs is not appreciated. However, an ischemic insult and/or geriatric vestibular syndrome is a potential differential diagnosis. Be aware, that due to the thick slice thickness of 10 mm – evaluation is limited, especially of the cerebellar region.

**DATE**

8/9/23

If not yet done so the workup should be complemented by examination of CSF and complete bloodwork to screen for brain disease that is not necessarily associated with structural changes of the brain



**PATIENT** parenchyma and rule out other systemic illness. MR imaging may be indicated in case of the strong suspicion of structural parenchymal changes of the brain.

Mandy Young

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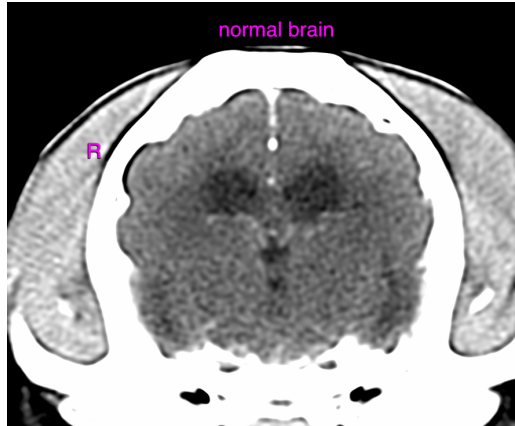
Mini Poodle

**SEX**

Spayed Female

**AGE**

15 Years



**The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
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