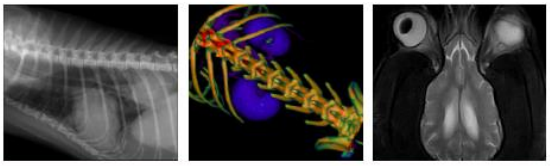
SonoPath Teleradiology

EDUCATIONAL TELECONSULTATION SERVICES™



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

PATIENT

Sassy Matthews

SPECIES

Canine

BREED

Pitbull

SEX

FS

AGE

11

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Advanced Animal Imaging

REFERRING VET

Blair Hollowell

INVOICE

54148

DATE

9-20-22

PRESENTING CLINICAL SIGNS

pet showing many cranial nerve deficits, i.e. muscle atrophy of masseter, ptosis, enophthalmos, third eyelid prolapse, head tilt, etc. No nystagmus. Hx of vestibular dz also

COMPUTED TOMOGRAPHY OF THE SKULL

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

COMPUTED TOMOGRAPHIC FINDINGS

Triadan 309 presents a marked irregular widening of the periodontal space and moth eaten osteolysis of the alveolar bone level with triadan 309 is appreciated. At the lingual aspect of the distal root of triadan 309, an isolated strong mineral opaque body is located within the alveolar crest and the medial part of the root is absent/fractured.

Triadan 301&401 present a moderate widening of the periodontal space. Triadan 208 presents evidence of root resorption.

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 ventricular system is non-dilated and symmetric.

The left mandibular lymph nodes are prominent.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Advanced periodontal disease 309 with sequestrum within the alveolar crest of the distal root – possibly fragment of the root with secondary local osteomyelitis
- Lymphadenopathy left mandibular lymph nodes – secondary to dental disease
- Periodontal disease lower incisor teeth
- Tooth root resorption 208
- Structural normal brain

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

In the present study of the brain there is no evidence of macromorphological disease, and no abnormalities are appreciated explaining the presenting clinical signs.

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 parenchyma and rule out other systemic illness. In case of the strong clinical suspicion of structural intraparenchymal changes an MRI may be considered.

Extraction of triadan 309 and removal of the sequestrum should be considered as well.

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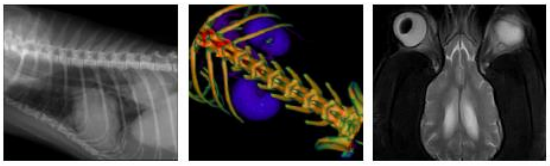

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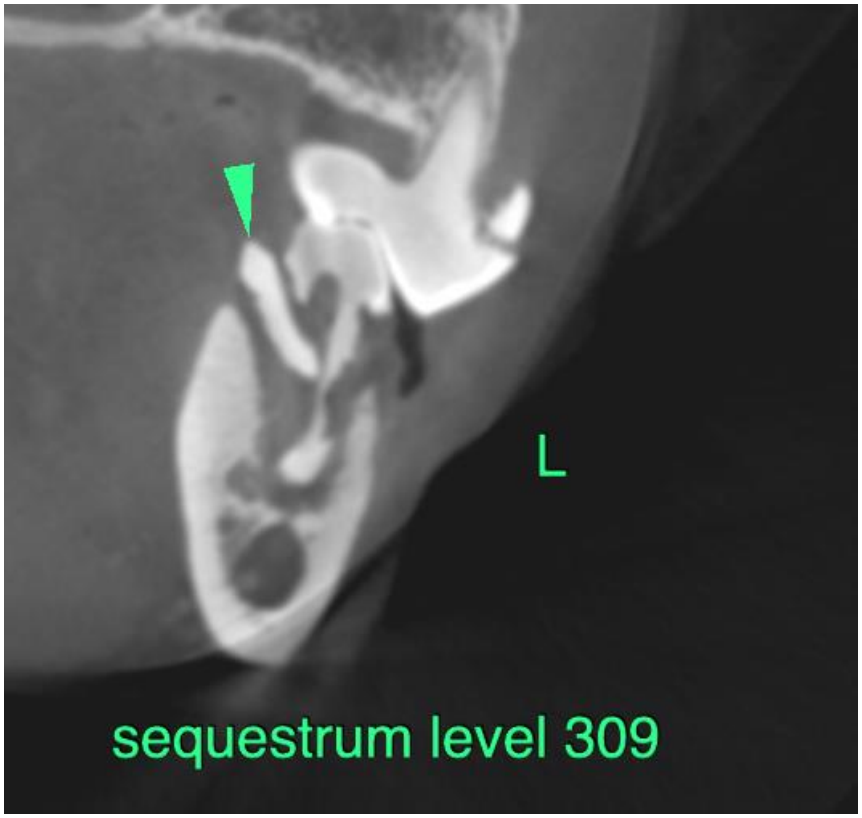

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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