



**PATIENT PRESENTING CLINICAL SIGNS**

**Duke Marion** Patient presented about a week ago for possible seizure and drooling a lot. Patient had a dental cleaning about 10 days ago where he had a tooth removed. Two days later presented for vestibular symptoms. Horizontal nystagmus, right sided head tilt and unable to stand. Patient does have mild bacterial infection in both ears.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: Missing right forelimb (leg removed previously for osteomyelitis at elbow- no underlying neoplastic process), horizontal nystagmus, right sided head tilt. Chem: ALP 246, cholesterol 452 CBC: Retics 130.6, neu 13.89, lymph 0.95

**BREED**

Border Collie

**COMPUTED TOMOGRAPHIC STUDY OF THE SKULL**

A pre- and post-contrast head CT is provided for review. One pre-contrast series, two post-contrast series.

**SEX**

Male

**COMPUTED TOMOGRAPHIC FINDINGS**

The brain attenuation is normal. No evidence of mass effect or cerebral falx shift.

The cribriform plate is normal.

**AGE**

12 Years

The nasal cavity, pharynx, and larynx are normal.

The frontal sinuses are normal.

The bulla cavity and auditory canal are normal.

**INTERPRETED BY**

Tilde Rodrigues Froes, DMV, MSc., Dr. Med Vet., Dipl. CBraRVet

The retrobulbar spaces are normal.

Bilaterally, the temporomandibular joints are congruent.

The triadan 108 is absent. There is mild horizontal and vertical bone loss along the teeth, especially the maxillary.

**HOSPITAL NAME**

Mobile Pet Imaging CFL

The mandibular and medial retropharyngeal lymph nodes are symmetric and normal.

The calvarial osseous structure and the frontal sinuses are normal.

**REFERRING VET**

Oviedo Veterinary Care and Emergency

A focal metallic artifact is seen within the left sided soft tissues of the mandibular and pterygoid fossa. No evidence of traumatic fractures in the adjacent bones, no evidence of soft tissue swelling, or mass effect. The ipsilateral retrobulbar space is normal.

On the edge of the exam, it is only seen on the post-contrast series, a right-side mildly heterogeneous attenuating thyroid mass is observed. The mass measures approximately 2.5cm x 1.4cm x 1.0cm.

**INVOICE**

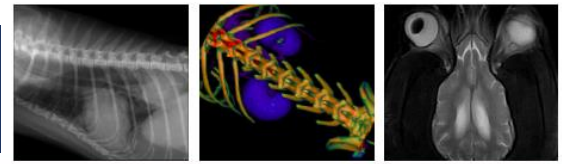
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On the edge of the exam, along the left bicipital groove, is sclerosis and minor osseous proliferation. An osteophyte is along the cranial aspect of the left greater tubercle of the left humerus.

On the edge of the exam, the right thoracic limb is absent.

**DATE**

3-7-23



**PATIENT COMPUTED TOMOGRAPHIC DIAGNOSIS**

Duke Marion

- Normal brain parenchyma, no evidence of a mass effect.
- Mild periodontal disease.
- Absent triadan 108, previous extraction.

**SPECIES**

Canine

- Right side thyroid mass, differential diagnosis includes thyroid neoplasm, for example thyroid carcinoma or thyroid adenoma.

- Left side shoulder osteoarthritis, chronic bicipital tenosynovitis, and supraspinatus tendinitis.
- Absent right thoracic limb, correlated to the previous history.

- Small metallic ballistic pellet is seen within the left sided soft tissues of pterygoid fossa, previous ballistic trauma, shotgun wound.

**BREED**

Border Collie

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No tomographic changes are detected in the brain that could be correlated to the clinical signs. However, the tomography's sensibility is low compared to MRI. Therefore, consider brain ischemia/vascular abnormalities as a differential. A cervical ultrasound and guided fine needle aspiration are suggested for further evaluation of the thyroid mass.

**SEX**

Male

The non-visible right thoracic limb correlates to the patient history.

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Mobile Pet Imaging CFL

**REFERRING VET**

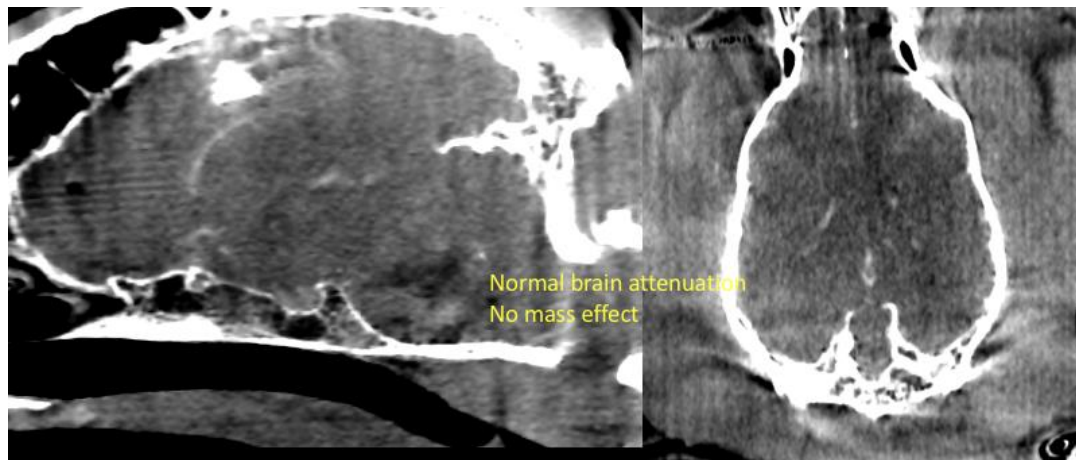
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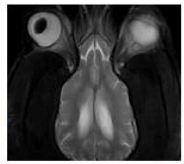
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**PATIENT**

Duke Marion

**SPECIES**

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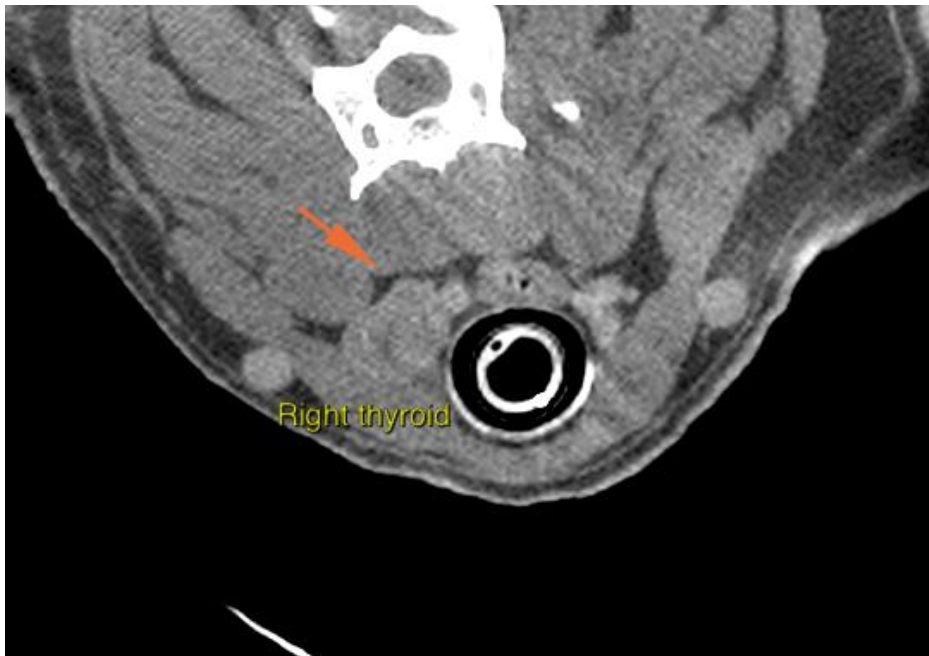
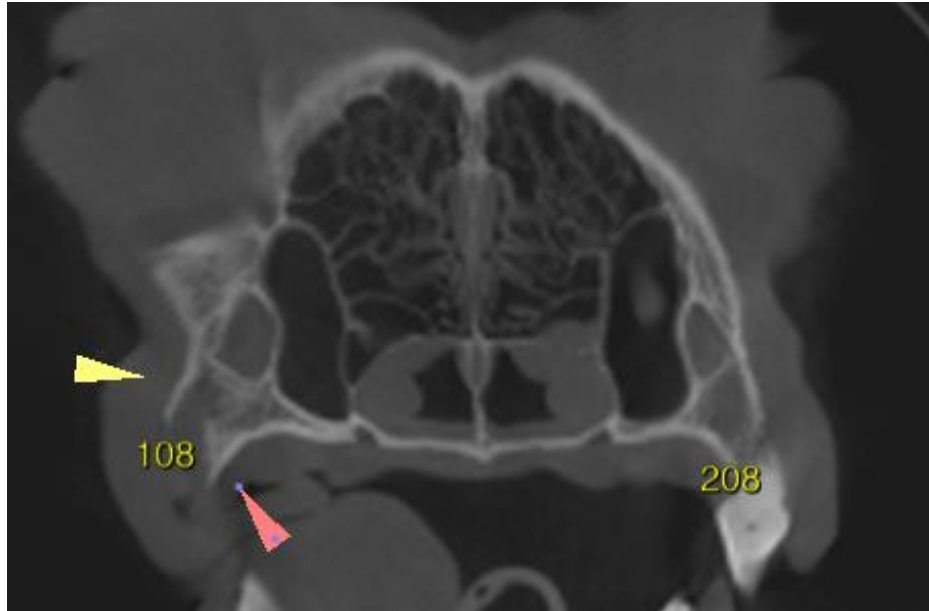
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Care and Emergency

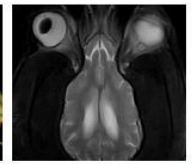
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**PATIENT**

Duke Marion

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.

**SPECIES**

Canine

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.

**Tilde Rodrigues Froes, DMV, MSc., Dr. Med.Vet., Dipl.CBraRVet**  
info@sonopath.com

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