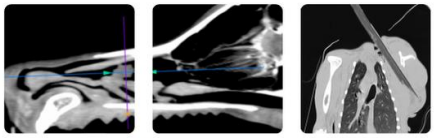


SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT
Ole Olson

SPECIES
Canine

BREED
Husky Mix

SEX
Male

AGE
15W

WEIGHT
28lbs

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

IMAGING PERFORMED BY
Sidney

HOSPITAL NAME
East Hill Animal Hospital

REFERRING VET
Laura Hall

INVOICE
74694

DATE
4-21-26

PRESENTING CLINICAL SIGNS

HBC
Very painful
extracted decidious 203,204 and 406
Abnormal PE/Chem/CBC/UA Results: wnl

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & PELVIS

Non-contrast computed tomography of the head, pelvis, and pelvic limbs.
Four series acquired using bone algorithms.

COMPUTED TOMOGRAPHIC FINDINGS

HEAD

Deciduous dentition is present and erupted.

Multiple small fracture lines are identified in the incisive bones and bilateral rostral maxilla, with minimal displacement overall; however, displacement is more pronounced on the left side at the level of the Triadan 203–204 region, associated with these embedded teeth.

The left maxillary deciduous canine tooth (Triadan 604) demonstrates a root fracture adjacent to the left maxillary fracture line. There is suspected involvement of the root of the embedded Triadan 203.

On the right maxilla, at the level of Triadan 103–104, subtle linear hypoattenuating lines are noted following the expected course of open cranial sutures; nondisplaced fractures cannot be excluded.

There is mild asymmetry of the rostral hard palate at the level of the palatine process, with suspected associated subtle fracture lines in the incisive/maxilla bones (> left side).

A small fracture line is identified in the right mandibular body at the level of the embedded Triadan 404.

Supernumerary erupted deciduous teeth are present in all four quadrants (Triadan 508, 608, 708, 808).

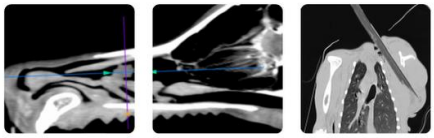
At the margin of the study, a hypoattenuating line is observed in the right mandibular condylar process, which appears asymmetric compared to the contralateral side. Given the patient's age and ongoing endochondral ossification, this finding is equivocal and may represent either a normal developmental feature or a fracture.

Mild accumulation of hypoattenuating fluid material is present in the rostral left nasal cavity, adjacent to the traumatic region.

PELVIS

Right Side:

There is a physeal fracture of the right femoral head consistent with Salter-Harris type I, showing moderate displacement and tiny adjacent bone fragments.



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A vertical fissure is noted in the body of the right ilium, with minimal displacement and extension to the ipsilateral acetabular growth plate.

At least two comminuted fissure lines are present in the right ischiatic table, without significant displacement.

A small chip fracture is present in the dorsal aspect of the right ilium (sacropelvic surface), with a fragment measuring approximately 3.4 mm.

Left Side:

Comminuted fractures are identified involving the cranial ramus of the left pubis, the left ischial ramus, the left ischiatic table.

These fractures show mild displacement and are associated with small adjacent bone fragments.

COMPUTED TOMOGRAPHIC DIAGNOSIS

Multiple maxillofacial fractures, including:
- Bilateral rostral maxillary and incisive bone fractures (left side more displaced).
- Suspected hard palate and palatine process involvement.
- Right rostral mandibular body fracture.
- Possible right mandibular condylar process fracture (vs. developmental variation).

Dental trauma:
- Root fracture of the left maxillary deciduous canine (Triadan 604)
- Suspected involvement of the embedded Triadan 203
- Presence of supernumerary deciduous teeth.

- Mild traumatic nasal fluid accumulation (left rostral nasal cavity).

Complex pelvic trauma:
- Right femoral head physeal fracture (Salter-Harris type I) with moderate displacement.
- A vertical fissure is noted in the body of the right ilium, with minimal displacement and extension to the ipsilateral acetabular growth plate.
- Right ischiatic comminuted fissures (non-displaced)
- Right ilium chip fracture (sacropelvic surface).
- Left-sided comminuted fractures of the pubis and ischium with mild displacement

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are consistent with polytrauma involving the maxillofacial structures and pelvis, compatible with the reported history of vehicular trauma.

The right femoral head physeal fracture (Salter-Harris type I) is clinically significant and may require orthopedic consultation for potential surgical management, depending on the patient's clinical condition. Orthopedic surgical consultation is recommended.

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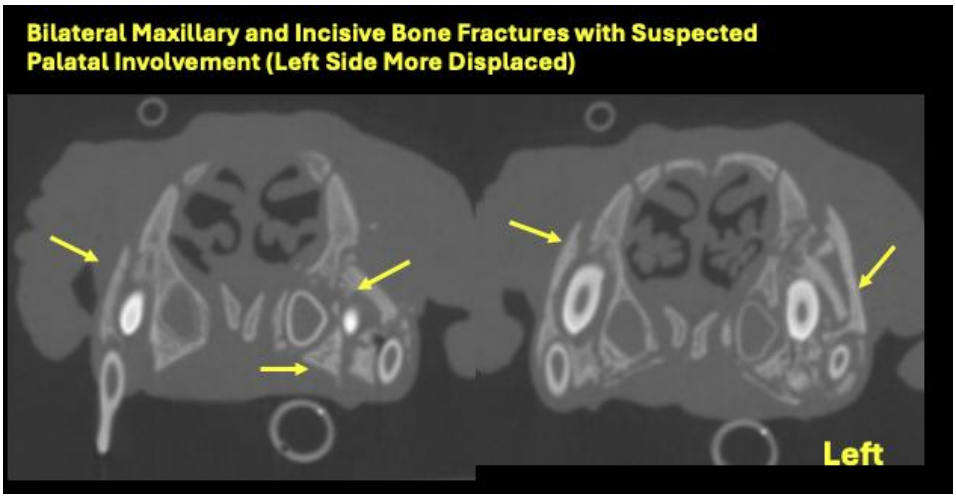
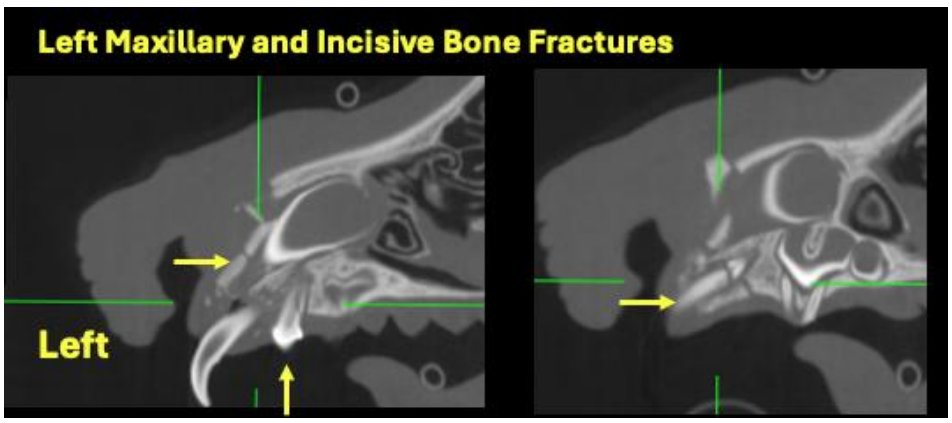
The maxillofacial fractures, particularly those involving the rostral maxilla, palate, rostral right mandible, and dentition, warrant comprehensive veterinary dental and maxillofacial evaluation to further assess the extent of the injuries and to determine whether surgical intervention is indicated, especially in relation to tooth root involvement and embedded teeth. This management does not necessarily need to be performed immediately; however, it should be considered as part of the treatment plan.

Appropriate analgesia and patient stabilization should be instituted in accordance with trauma management protocols.

Follow-up imaging may be considered to reassess the equivocal finding involving the right mandibular condylar process, as well as to monitor the affected dentition, particularly if clinical signs persist or progress.





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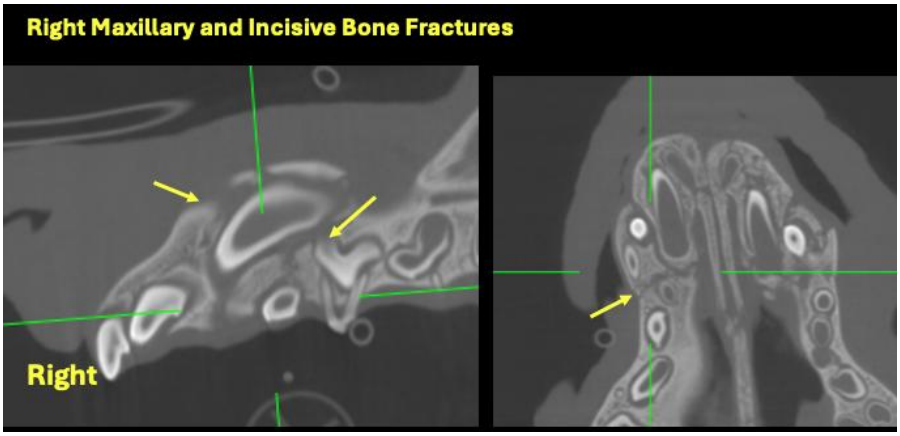

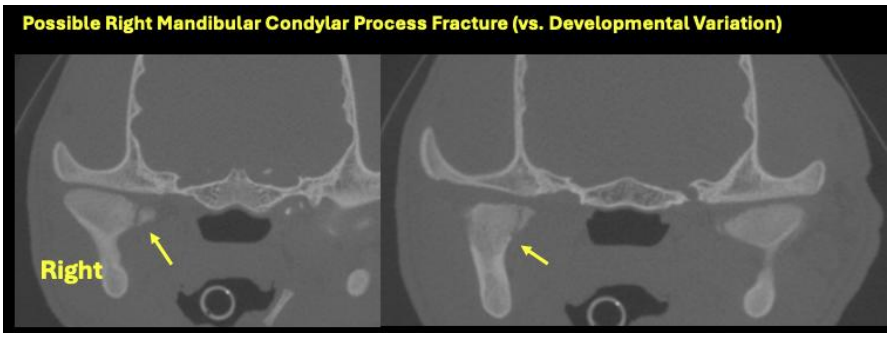

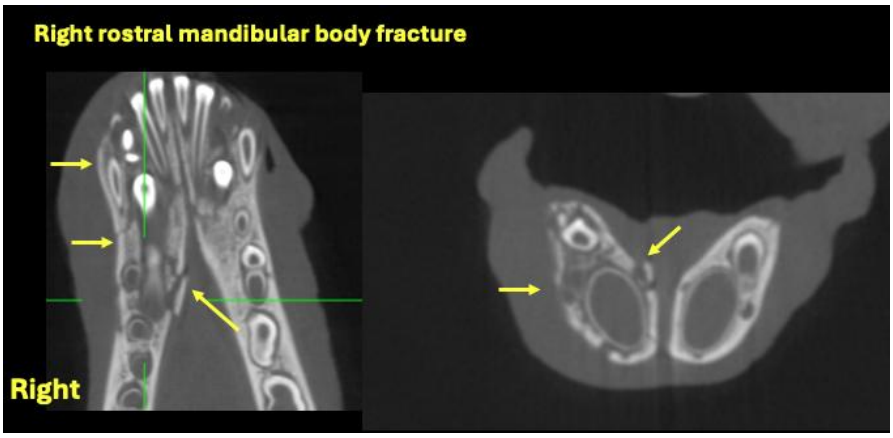

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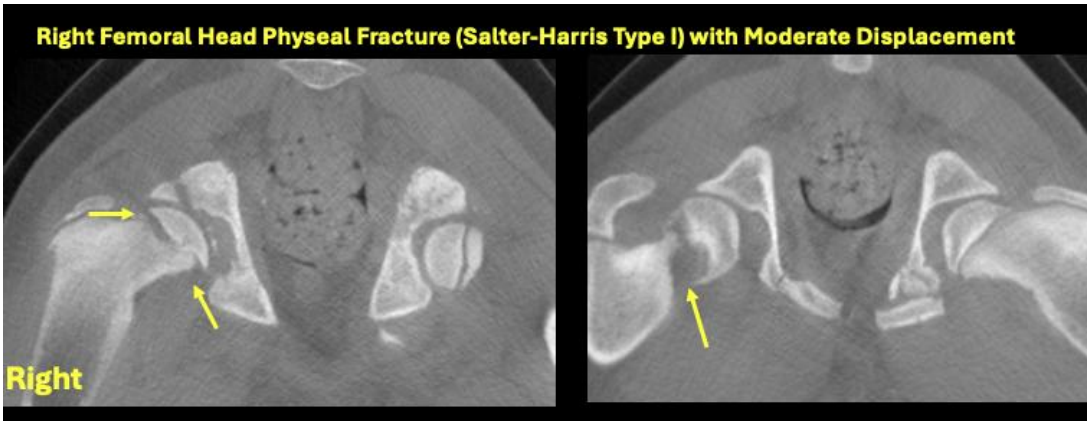

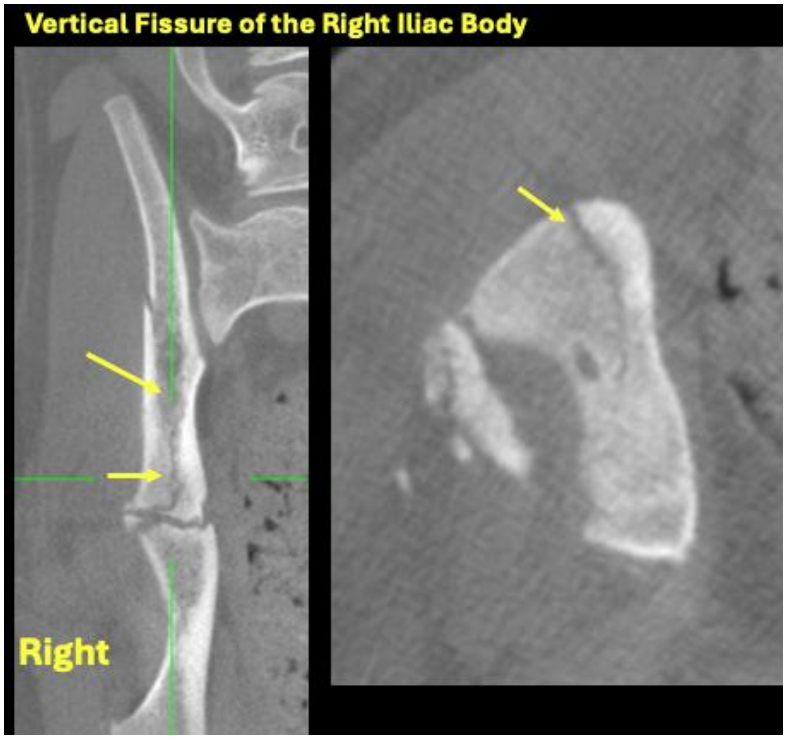

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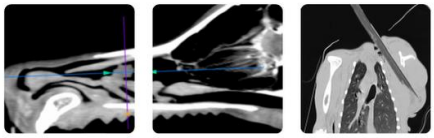

Teleradiology
Educational Teleconsultation Services™

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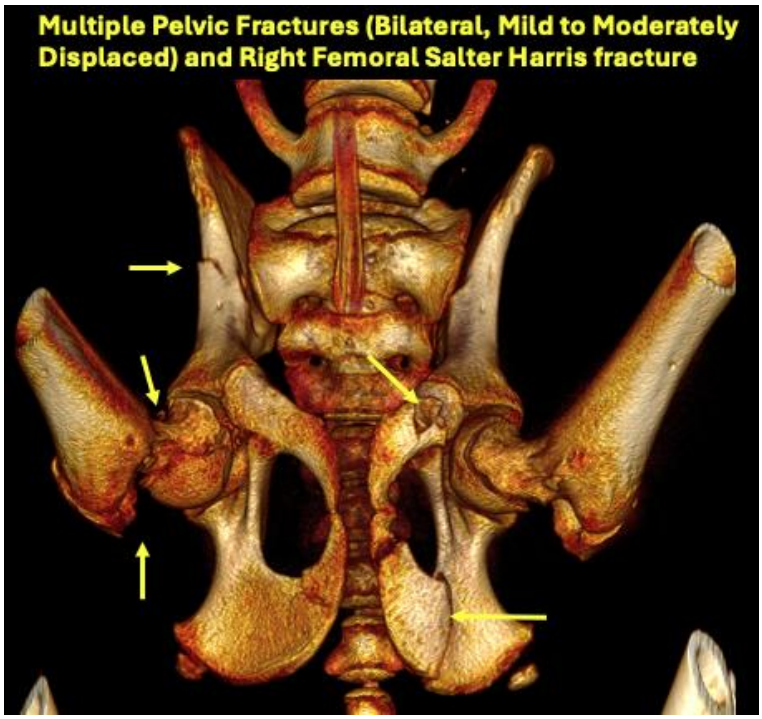

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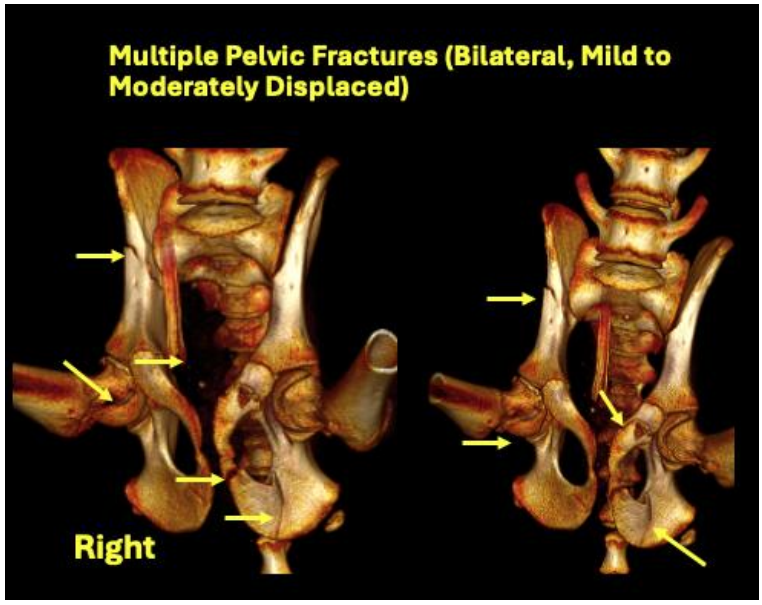

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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