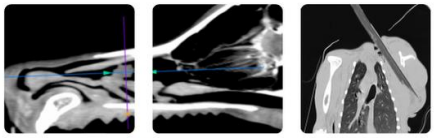

PATIENT

Sir Remington Nemeth

SPECIES

Canine

BREED

German Shepherd

SEX

MN

AGE

9Y

WEIGHT

81.4lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

MH

HOSPITAL NAME

Animal Medical Center of Mt. Pleasant

REFERRING VET

Steven Epstein, DVM

INVOICE

74535

DATE

4-9-26

PRESENTING CLINICAL SIGNS

Suspected Horners Syndrome

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

A pre- and post-contrast CT study of the head are provided for review totaling 2 series. One pre-contrast series of the head bone algorithm. One post-contrast (delayed phase) series of the head bone algorithm.

COMPUTED TOMOGRAPHIC FINDINGS

No evidence of intracranial mass effect. or midline shift. The pituitary region is unremarkable.

The calvarium and facial bones are intact. No evidence of fractures, osteolysis, or periosteal reaction is identified.

Multifocal punctate foci of mineralization are identified, incidental dystrophic dural mineralization

The tympanic bullae are air-filled, with normal wall thickness and contour. A small, focal hyperattenuating mineral structure is observed within the left tympanic cavity, compatible with an incidental otolith.

The external ear canals are unremarkable.

The nasal cavities, turbinates and paranasal sinus are within normal limits.

The cribriform plate is intact.

The orbits, globes, and retrobulbar spaces are within normal limits.

The temporomandibular joints are bilaterally congruent.

The medial retropharyngeal lymph nodes and mandibular lymph nodes are unremarkable.

The Triadan 405 is missing, with retained root fragment.

C2-3 small incomplete bridging vertebral endplates spondylosis deformans.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Incidental mineral-attenuating structure within the tympanic cavity, compatible with an otolith.
- Incidental dystrophic dural mineralization.
- The Triadan 405 is missing, with retained root fragment.
- Otherwise, unremarkable computed tomographic study of the head.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No tomographic abnormalities are identified to explain neurological clinical signs.

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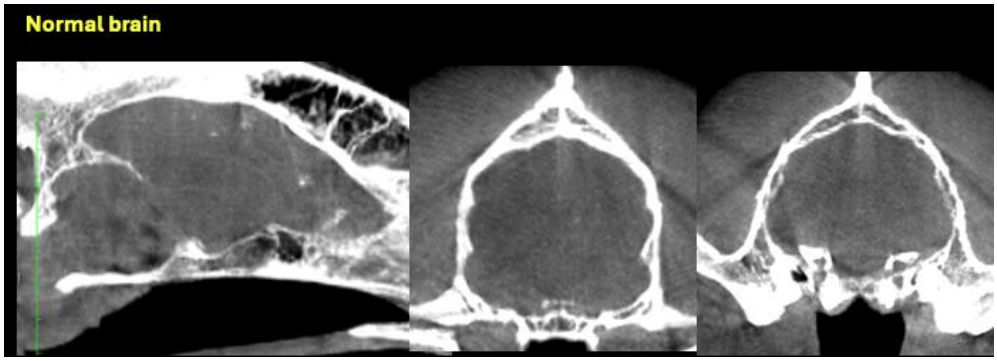
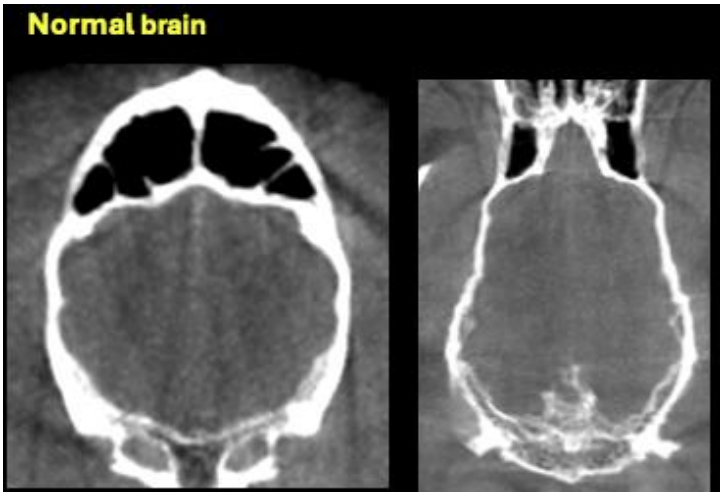
It should be noted that computed tomography has inherently lower soft tissue contrast resolution compared to MRI, and subtle lesions may not be detectable by this modality. MRI of the brain and cervical spinal cord is recommended if clinical signs persist or progress.

Given the clinical suspicion of Horner's syndrome and the absence of significant abnormalities on the present head CT examination (aside from incidental findings), further investigation is recommended. Additional imaging of the cervical region, including a complete cervical CT study, as well as evaluation of the cranial mediastinum via thoracic CT or thoracic X-ray.





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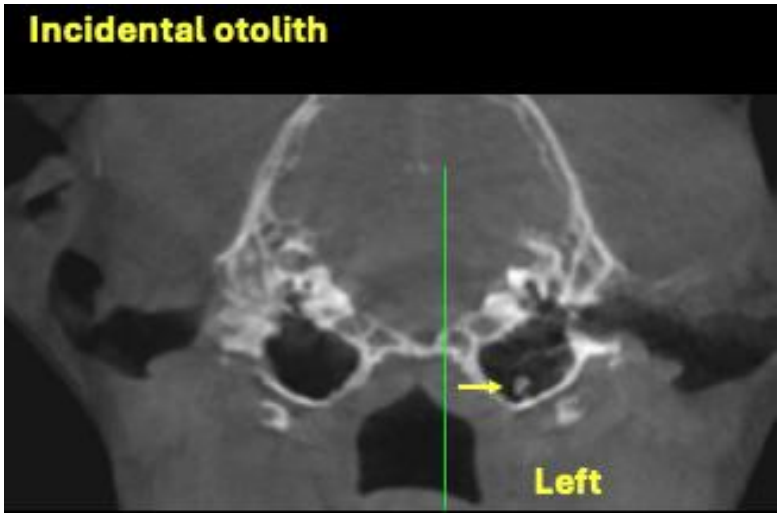

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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