

## Bob the Tilter



Signalment: 10 y.o. M Labrador Retriever

Current History: "Not the dog he used to be." Owner complains that he does not seem to hear them and shakes his head frequently. He is always scratching at his ears. His appetite has been reduced lately, and that is definitely not normal for him. The owners think he is behaving as if he is nauseated.

Pertinent Past History: previous history of chronic otitis (right ear for 2 years and left ear for 4 months); ears have become too painful to clean now; previous treatment: ear flush solutions (1-2x per week); clotrimazole (azole antifungal drug), antibacterial, and antiinflammatory

Physical Examination:

Body Weight: 35 kg; Body Condition Score: 3/5

General: Bright, alert, responsive

T:102.0 P: 80 R:20

Mucous Membranes: pink and moist, CRT<2 seconds

Eyes: clear with nuclear sclerosis, nystagmus with fast component to the left.

Ears: dark brown to black viscous discharge; surrounding skin is scratched and red; ears are painful and he reacts by trying to bite you

Nose – WNL

Oral cavity – WNL

Peripheral lymph nodes – Right submandibular lymph node is slight enlarged and painful

Heart – no obvious murmurs or arrhythmias – Heart Rate: 80 bpm

Lungs – auscultates WNL, rate – 20

Abdominal palpation – WNL

Musculoskeletal – WNL

Integument – except for near ear, WNL

Nervous system – head tilt to the right, nystagmus with fast component to the left. When asked to walk, he walks slowly and moves toward the right, rather than in a straight line.

Imaging: A CT of Bob’s head is performed and can be viewed in the accompanying PDF. Flip through page 1-10 to see serial sequences of transverse sections of his head focusing on the area near the ear canal and using a setting to highlight bony areas. Pages 11-16 are a different setting and area a sequence of transverse cuts through the head to highlight soft tissue changes.

#### QUESTIONS TO ADDRESS IN FORMULATION:

1. Develop a problem list for this dog following your physical exam findings and initial diagnostics. Be sure to copy your observations into your formulation to document the problems.
2. Describe the radiographic findings in this dog (compare with accompanying “normal” CT of the head).
3. Link Bob’s neurological examination findings to cranial nerve, sensory organ or brain structures. Be as anatomically specific as possible.
4. What is the most likely pathological basis of Bob’s current clinical signs?
5. What is Bob’s prognosis, given appropriate treatment?
6. List at least 2 learning issues you encountered in addressing this case. List at least 1 reference (primary references preferred) that helped you address each learning issue.