- Spinal reflexes: not evaluated
- Cranial nerves: within normal limits
- Spinal palpation: discomfort on palpation of the ventral cervical region
- +/- Nociception: discomfort on palpation of the ventral cervical region
- Neuroanatomic localization: Cervical spine

**DIAGNOSTICS:**

1. PCV/TP: 41%, 6.9 g/dL
2. Blood Glucose: 119 g/dL
3. Limited Brain MRI

**FINDINGS**:

1. There is crowding of the caudal fossa, resulting in mild flattening and rostral deviation of the caudal cerebellum.
2. There is focal signal attenuation of the subarachnoid space at the level of the foramen magnum and the cerebellar vermis protrudes caudally toward the foramen magnum.
3. There is minimal dilation of the fourth ventricle and quadrigeminal cistern. Subjectively, the caudal horns of the included lateral ventricles are mildly dilated.
4. Minimal, diffuse central canal dilation is present, measuring up to 1.4 mm in diameter, extending from the midbody of C2 to the midbody of C7 for a total length of 9.2 cm in length.
5. The remaining included structures are unremarkable.

**CONCLUSIONS:**

1. Crowding of the caudal fossa, flattening of the cerebellum, and minimal to mild ventriculomegaly, consistent with mild Chiari-like malformation (caudal occipital malformation syndrome). Equivocal central canal dilation may be a normal variant versus early syringomyelia.

**FOLLOW-UP:**

No follow-up is needed unless Taylor begins having any abnormal behavior or exhibits neurologic changes.

Thank you again for bringing Taylor to the University of Missouri and entrusting us with her care. If you have any questions or concerns please do not hesitate to contact us at 573-882-7821.

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**Signature**

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