



## PATIENT

Missy Malloy

## SPECIES

Canine

## BREED

Mix

## SEX

Spayed Female

## AGE

10 Years

## WEIGHT

38 Pounds

## INTERPRETED BY

Heike Rudolf, DVM, Dr.  
med. Vet., DipECVDI  
DVR

## IMAGING PERFORMED BY

Veterinary Technicians

## HOSPITAL NAME

Northshore VH

## REFERRING VET

Dr. Brita Kiffney

## INVOICE

35693

## DATE

10/26/25

## PRESENTING CLINICAL SIGNS

History: limping on left hind

Abnormal PE/Chem/CBC/UA Results: decreased ROM lumbar spine Nervous System: decreased proprioception left hind, head tilt to the right, no cranial nerve deficits.

## RADIOGRAPHIC STUDY OF THE SPINE & PELVIS

Spine: the surrounding soft tissue structures appear physiological.

Number and shape of the vertebrae are physiological; their surfaces are smooth. No evidence of osseous destruction or lysis is present along the spine.

The facet joints are congruent.

The disc spaces appear to be relatively even.

Pelvis: the muscle mass on the left hind appears slightly reduced. The osseous structures are within normal limits. The center of both femoral heads is located medial to the respective dorsal acetabular edge. Both coxo-femoral joints present smooth osseous margins and congruent joint spaces.

## RADIOGRAPHIC DIAGNOSIS

- Mild left sided muscle atrophy

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I can see no obvious pathology that would explain the clinical signs. Accurate positioning of the spine is difficult, even under G.A., and cord compression can only be identified with myelography or in cross-sectional imaging. In case neurological deficits and/or severe pain unresponsive to medical management are present, CT or MRI will be necessary. Prior to this, clinical and radiographic examination of the stifles is recommended, if it has not already been done, in case cruciate disease is present.



**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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.

**Heike Rudolf**, DVM, Dr. med. vet., DipECVDI, DVR  
[info@sonopath.com](mailto:info@sonopath.com)