



**PATIENT PRESENTING CLINICAL SIGNS**

**Buddy MacDonald** History: Episodes of pain in the last 3-4 weeks. Was started on NSAIDs, Gabapentin - helped. However since finishing the pain medications, pain has come back, and dog yelps and cries in pain when he gets up from resting position. Has an arched back.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: CBC WNL

**Canine** **RADIOGRAPHIC STUDY OF THE SPINE AND PELVIS**

**L-Spine**

**BREED** A moderate amount of s.c. fat is present. Number and shape of the vertebrae are physiological. The skeletal structures are well mineralized and have smooth surfaces. No signs of aggressive osteolysis have been identified. The facet joints appear to be congruent. The disc spaces T12-L5 and L7/S1 are of homogeneous width. The intervertebral foramina and disc spaces L5-L7 appear smaller than the rest.

**Bernedoodle**

**SEX** **Pelvis**

**Neutered Male** The lateral thigh muscles on the right appear reduced.

**AGE** All bones are well mineralized, have a normal trabecular structure and a smooth surface.

**4 Years** The centre of both femoral heads is located medial to the respective dorsal acetabular edge. The medial aspect of the left hip joint appears to be slightly increased. A thin, irregular, mineral line is apparent in the region of the left joint capsule.

**INTERPRETED BY**

**RADIOGRAPHIC DIAGNOSIS**

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

- Possible muscle atrophy right lateral thigh
- Possible disc space narrowing L5-7
- Mild joint capsule insertion mineralization, left

**HOSPITAL NAME**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**Balmy Beach PH**

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. Depending on the severity of the clinical signs, CT or MRI will be necessary in case an extruded disc needs to be removed. The suggestion of right sided muscle atrophy will have to be verified manually. However, should it be real, stifle pathology, such as cruciate ligament disease, or neuropathy of the lumbar plexus muscles are possible. Thus, the pelvis should be included in the cross-sectional imaging study. Gastrocnemius myositis is another possibility and can also be identified in cross sectional imaging.

**REFERRING VET**

**Dr. Singh**

**INVOICE**

**TECHNICAL COMMENTS**

**16748** All spinal views are rotated. No side marker on VD pelvis.

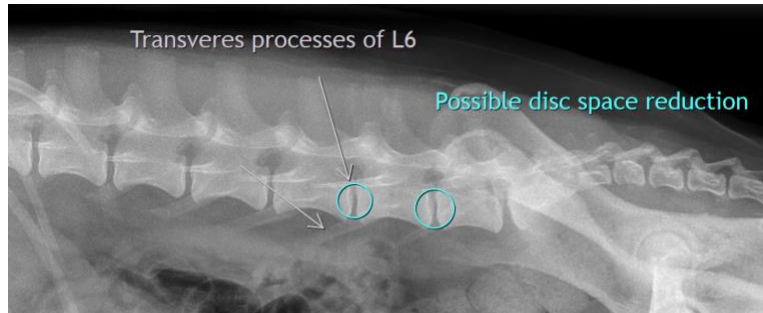
**DATE**

**8/5/22**



**PATIENT**

Buddy MacDonald



**SPECIES**

Canine

**BREED**

Bernedoodle

**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.**

**SEX**

Neutered Male

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  
dr.h.rudorf@gmail.com

**AGE**

4 Years

**INTERPRETED BY**

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

**HOSPITAL NAME**

Balmy Beach PH

**REFERRING VET**

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