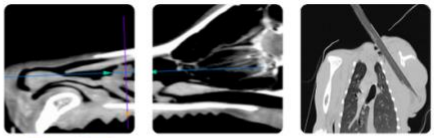

PATIENT

Sasha Trenkmann

SPECIES

Canine

BREED

Shih Poo

SEX

Spayed Female

AGE

12 Years

WEIGHT

22 lbs

INTERPRETED BY

Dr. Leticia Utsch MV

IMAGING PERFORMED BY

JK

HOSPITAL NAME

Hamburg Veterinary Clinic

REFERRING VET

Dr. DenHeyer

INVOICE

16302

DATE

05/15/26

PRESENTING CLINICAL SIGNS

Acutely lame left forelimb post grooming, low head carriage, resist range of motion. R/O IVVD

RADIOGRAPHIC STUDY OF THE SPINE

A radiograph of the spine in one imaging plane is provided for review.

RADIOGRAPHIC FINDINGS

Equivocal increased opacity seen in the foramen space of L1-L2.

Multiple sites of intervertebral disc space narrowing in the cervicothoracic and thoracolumbar spine, likely related to positioning and collimation. However, there seems to be intervertebral disc space collapse at L3-L4.

Ventral spondylosis seen at T5-T6, T12-T13, L2-L3, L4-L5, L5-L6 e L7-S1 (likely incidental).

In the caudally positioned forelimb, there is irregular bone proliferation seen in the dorsodistal radius.

Osteophytes seen in both elbows.

In the included abdomen, there is liver enlargement with suspected mass in caudoventral region. Multiple round, mineral-opaque stones are seen in the urinary bladder.

Reduced luminal diameter of the cervicothoracic trachea, compatible with tracheal collapse.

RADIOGRAPHIC DIAGNOSIS

- Increase opacity in foraminal space in L1-L2
- Narrowed disc space evident in L3-L4
- Degenerative joint disease (DJD) in elbows, bilaterally
- Likely tenosynovitis of *the abductor pollicis longus* muscle. Laterality undermined
- Liver enlargement and mass
- Radiopaque bladder stones.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

Evaluation of the spine is somewhat limited by positioning, broad collimation and lack of orthogonal views. Intervertebral disc space narrowing at L3-L4 is noted. Equivocal increased opacity is present in the L1-L2 intervertebral foramen. These findings may be related to intervertebral disc disease (IVDD), but at this moment are of uncertain of clinical significance - forelimb lameness and low head carriage are unrelated but reduced ranged of motion may be associated.

The reported clinical signs seem to likely reflect cervical pain/neurologic disease or forelimb orthopedic disease. Bilateral elbow DJD and suspected tenosynovitis may be related to reported signs. The cervical spine is unremarkable, but survey radiographs are limited for evaluation of IVDD. Correlation with neurologic and orthopedic examination findings is recommended. Consider additional dedicated cervical and forelimb imaging. To definitely confirm/ rule out IVDD, recommend advanced imaging (CT/MRI), as clinically indicated.

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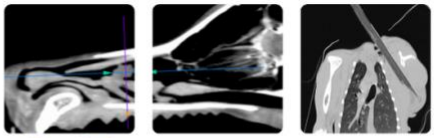

Teleradiology
Educational Teleconsultation Services™

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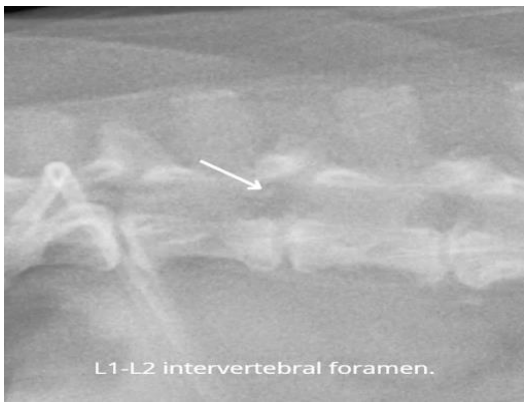

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Dr. Leticia Utsch MV
info@sonopath.com