

**PATIENT**

Mason Jenkins

**PRESENTING CLINICAL SIGNS**

Dog presented not jumping up on furniture as normal. Does not want to go up stairs. Bloodwork essentially WNL, radiographs taken for further evaluation of back

**SPECIES**

K9

**RADIOGRAPHIC STUDY OF THE THORACOLUMBAR SPINE**

Lateral and ventrodorsal views totaling 3 images available for review.

**BREED**

Mini Schnauzer

There are 12 thoracic vertebrae.

The 1<sup>st</sup> lumbar vertebrae presents rudimentary transverse processes, and a vestigial rib is seen on the left side.

**SEX**

MN

No significant intervertebral disc space narrowing is seen. There is no evidence of aggressive bone lesions or traumatic osseous injury.

**AGE**

5 Years, 11 Months

- Congenital vertebral malformation with 12 thoracic and asymmetric thoracolumbar transitional vertebra - otherwise, normal radiographic presentation of the thoracolumbar spine.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The radiographic study reveals an abnormal vertebral count with 12 thoracic and an asymmetric thoracolumbar transitional vertebra. This usually represents an incidental finding; however, altered biomechanics in the thoracolumbar junction area cannot be ruled out entirely. The study is negative for aggressive bone lesions. No significant osteopenia is seen. There is no evidence of discospondylitis or traumatic osseous injury. In case of persisting or progressive clinical signs, further definition by means of cross sectional imaging would be an option.

**HOSPITAL NAME**

Blairstown Animal  
Hospital

**REFERRING VET**

Dr. Leal

**INVOICE**

47731

**DATE**

10-7-21



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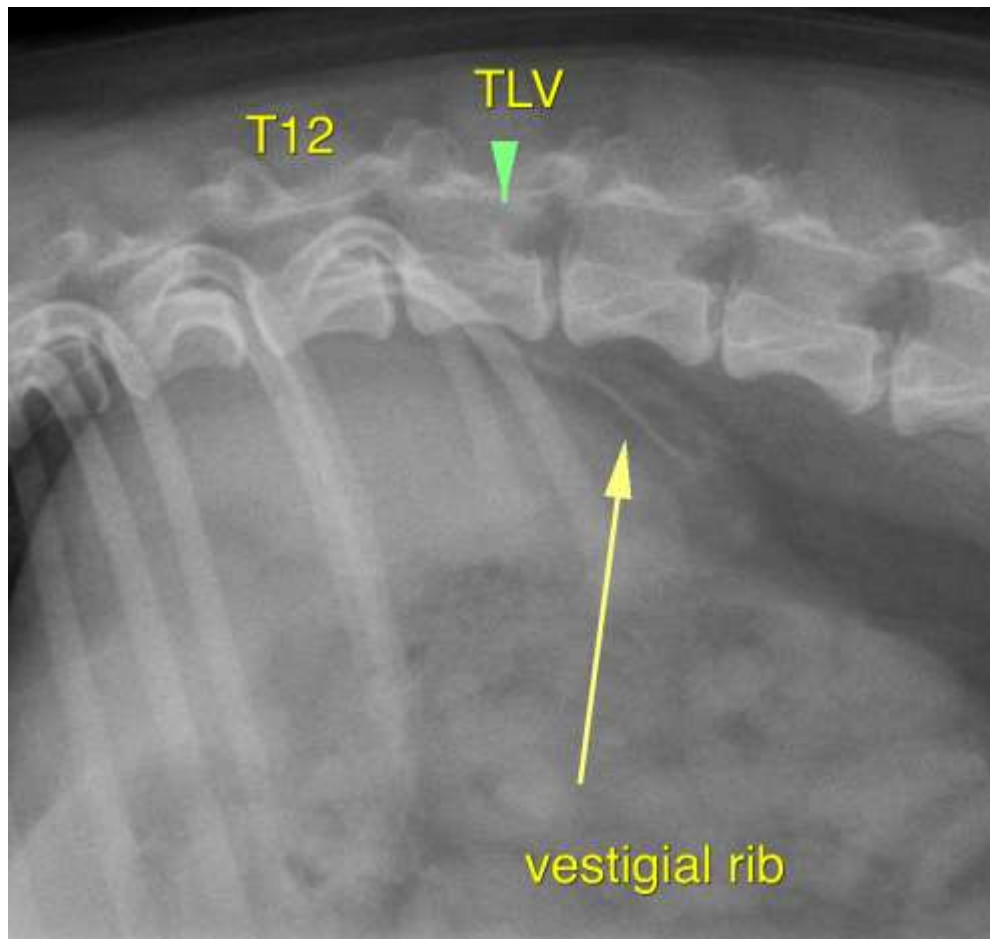
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Nele Eley, DVM, Dr. med. vet., DipECVDI**  
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