



PATIENT

Georgy Csapo

PRESENTING CLINICAL SIGNS

Chronic over grooming of lumbar area for 1 year; litter mate diagnosed with sacral dz; although not lame, P is bothered/ uncomfortable on palpation of caudal half of trunk; not lame and can "stand up" on hind limbs to explore higher surfaces; PLS COMMENT ON DISORGANIZED/ LYTIC(?) SACRUM ESP ON V/D VIEW.

SPECIES

Feline

RADIOGRAPHIC STUDY OF THE SPINE

Lateral and ventrodorsal views of the cervical, thoracic, and lumbar spine totaling 8 images available for review.

BREED

DSH

RADIOGRAPHIC FINDINGS

Number, alignment, and general anatomy of the cervical, thoracic, and lumbar vertebrae present within normal limits.

SEX

Male Neutered

The sacrum comprises three fused vertebrae. The dorsal spinous process of the 1st sacral vertebra is relatively short otherwise the sacrum presents within normal limits.

AGE

4

The colon and its gas opaque content and fecal matter superimpose onto the sacrum which creates the artificial impression of osteolytic changes on the orthogonal view. However, this is not confirmed to be present on the lateral views.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

- Normal radiographic presentation of the cervical, thoracic, and lumbar spine.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

DTLAvets

The radiographic study of the spine does not reveal evidence of structural pathology. Soft tissue changes such as within the axial musculature, spinal cord, intervertebral discs, or other cannot be ruled out entirely. Feline hyperesthesia syndrome appears to be one potential differential diagnosis as well. Further definition by means of an MRI could be considered in case of deteriorating or recurring clinical signs.

REFERRING VET

Dr. Castaneda

INVOICE

54914

DATE

11-1-22



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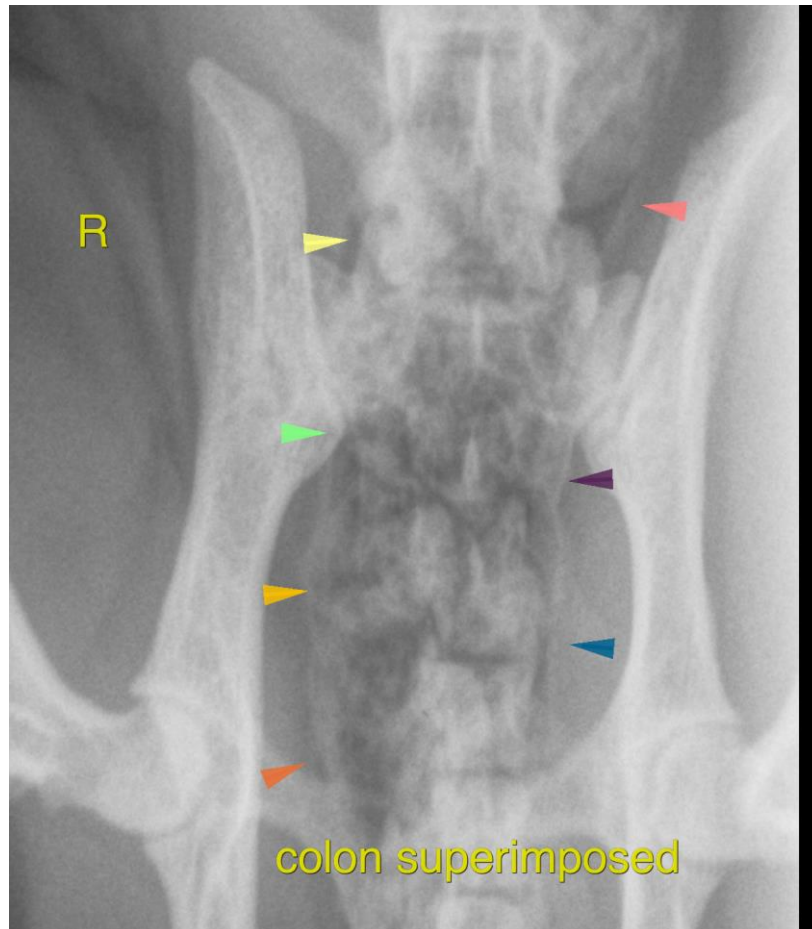
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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