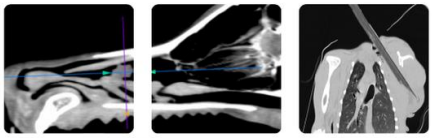

PATIENT

Braxton Malakhova

SPECIES

Canine

BREED

Belgian Shepherd

SEX

MN

AGE

8M

WEIGHT

64lbs

INTERPRETED BY

Nele Eley (Ondreka), DVM Dr. med. vet., DipECVDI

IMAGING PERFORMED BY

Mobile Pet Imaging

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Armstrong

INVOICE

73756

DATE

2-16-26

PRESENTING CLINICAL SIGNS

- Orthopedic consult: Coxofemoral and stifle ROM is normal and pain free.
- Lumbosacral dorsal digital pressure elicits severe pain with the patient vocalizing loudly.
- In my opinion the dorsal lamina of the sacrum dips below the dorsal lamina of L7 causing a compression of the cauda equina.

COMPUTED TOMOGRAPHIC STUDY OF THE PELVIS

Plain and post contrast neutral, flexed, and extended studies of the lumbosacral junction are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

Lumbosacral spine

The lumbosacral junction presents within normal limits. No telescoping of the sacral roof, no step formation, and no stenosis is identified.

The intervertebral discs are normal. No disc herniation is visualized.

The dorsal lamina of S1 and sacrum are in normal alignment relative to L7. No compression of the cauda equina is directly seen.

Coxofemoral Joints

The right hip presents mild congruence with joint space divergence. Early subchondral bone sclerosis and new bone formation along the acetabular roof are noted.

Synovial invaginations are noted in the depth of both acetabular grooves.

The left hip reveals no significant joint space divergence or osteophytosis at present.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Normal CT presentation of the lumbosacral spine with no evidence of stenosis, subluxation, or telescoping.
- Mild signs of hip dysplasia of the right coxofemoral joint with early osteoarthritic changes.
- Mild synovial invaginations of both coxofemoral joints.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The right hip demonstrates early degenerative changes suggestive of hip dysplasia including joint space incongruence, subchondral bone sclerosis, and early osteophyte formation.

The synovial invaginations may be an early sign of joint laxity or other arthropathy.

No lumbosacral osseous abnormalities were identified to explain the reported pain. Functional or soft tissue causes cannot be completely excluded. Orthopedic follow up for assessment of passive hip laxity using PennHIP or other distraction method to quantify risk of progression of osteoarthrosis is recommended.

Consider MRI for further evaluation of the lumbosacral junction should the clinical signs strongly suggest lumbosacral pathology.

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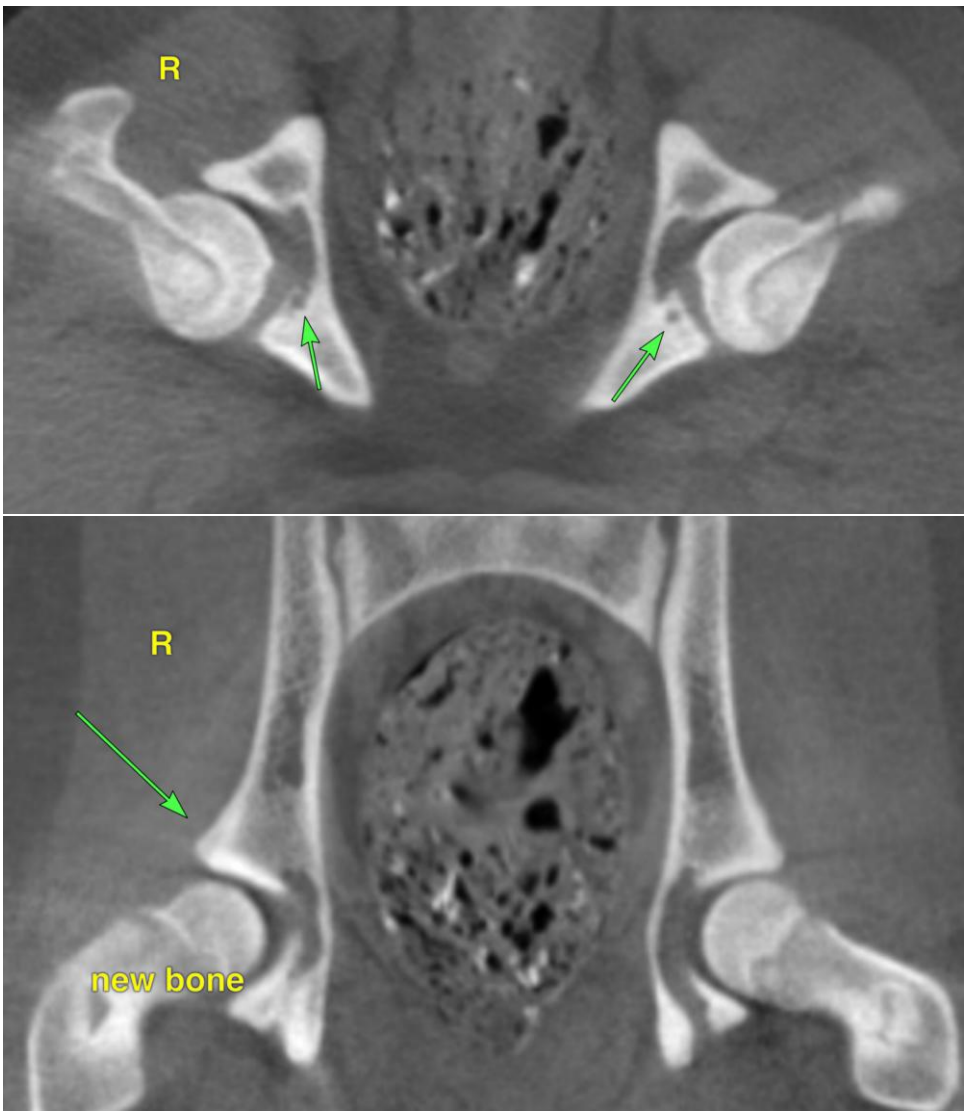

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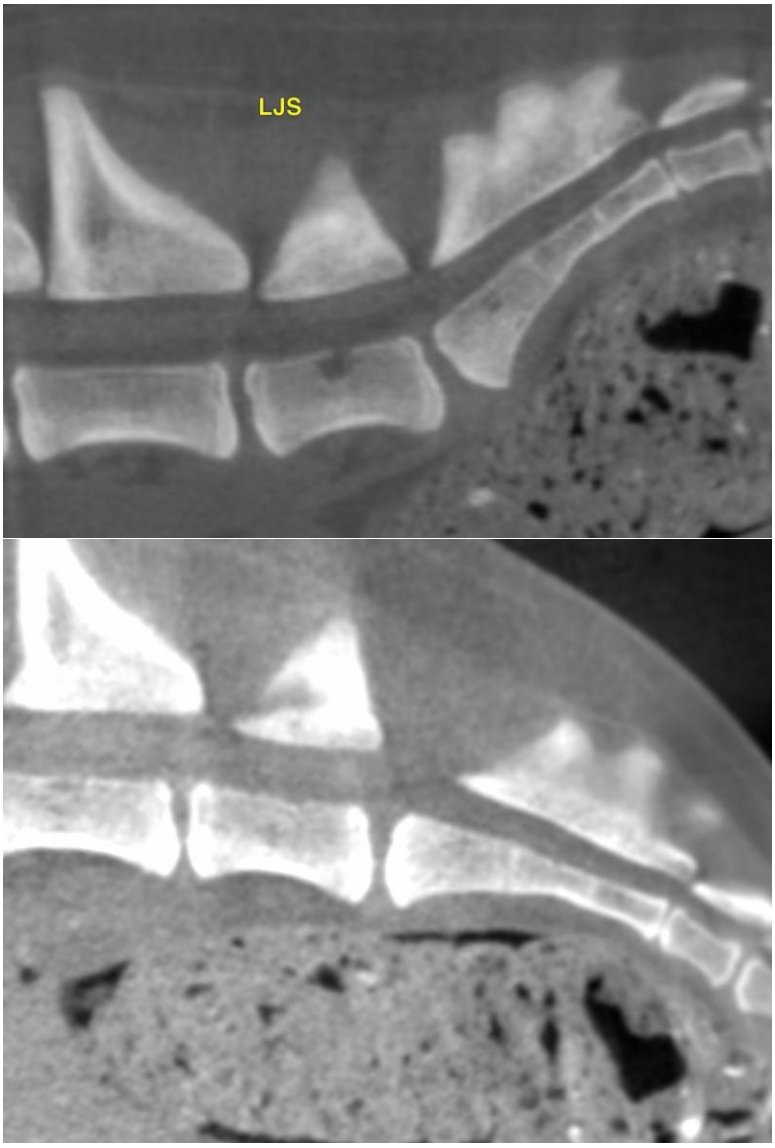

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 (Ondreka), DVM, Dr. med. vet., DipECVDI
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