



PATIENT

Happy Kovach

SPECIES

Canine

BREED

Mix K9

SEX

F

AGE

9

WEIGHT

56.3

INTERPRETED BY

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

IMAGING PERFORMED BY

Hamburg Veterinary
Clinic

HOSPITAL NAME

Hamburg Veterinary
Clinic

REFERRING VET

Dr Branning

INVOICE

73848

DATE

2-18-26

PRESENTING CLINICAL SIGNS

- CP deficits hind limb and right front
- angular limb deformity left front
- painful

RADIOGRAPHIC STUDY OF THE LUMBAR SPINE

Lateral view of the lumbar spine available for review in jpg format.

RADIOGRAPHIC FINDINGS

The lumbosacral junction presents moderate narrowing of the lumbosacral intervertebral disc space. Endplate sclerosis of L7 and S1 is seen. Ventral spondylosis deformans is present. The changes are consistent with degenerative lumbosacral stenosis.

Moderate spondylosis deformans is present at L2/3 and L3/4.

Mild spondylosis is seen at L1/2.

Vertebral alignment is otherwise maintained. No evidence of acute fracture, luxation, or aggressive bone disease is seen.

Metallic foreign body consistent with a projectile is identified within the caudal abdominal soft tissues without evidence of emphysema or tissue disruption.

RADIOGRAPHIC DIAGNOSIS

- Moderate degenerative lumbosacral stenosis
- Multilevel lumbar spondylosis deformans
- Incidental retained metallic foreign body within caudal abdominal soft tissues.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The imaging findings indicate chronic degenerative disease of the caudal lumbar spine and lumbosacral junction which can result in cauda equina region pain and neurologic deficits including proprioceptive deficits of the hind limbs, reluctance to rise, jump, or extend the hips, and pain upon lumbosacral palpation. Clinical correlation is recommended. Advanced imaging such as MRI may be required to evaluate for nerve root compression, intervertebral disc protrusion, and other soft tissue components of lumbar spinal disease and/or cauda equina syndrome.



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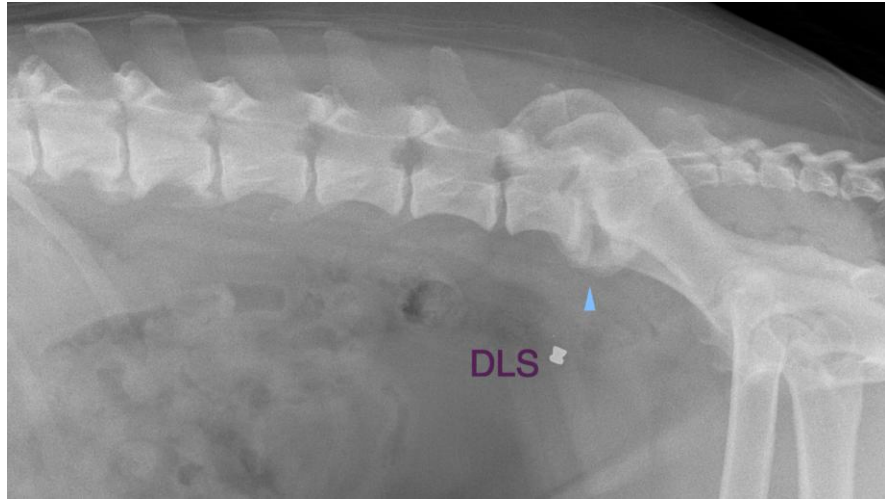
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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