



**PATIENT**

Koda Ashurst

**PRESENTING CLINICAL SIGNS**

P started limping on the 26th and is has progressively gotten worse. It has gotten. P may have jumped off a sloped area in the backyard. No whining or whimpering. Swelling in the rear end, redness. first swelling started then the limping. Now the P is to a point where he can not walk without a sling.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: MS: hind limb weakness-ataxic, decrease CP in left hind limb, absent in right limb, increase reflexes in patellas with femoral nerve weakness.

**BREED**

Doodle

**MAGNETIC RESONANCE IMAGING STUDY OF THE LUMBAR SPINE**

From L3-sacrum – T2 and T1-weighted plain and post contrast images in various image planes available for review.

**SEX**

MN

The patient is obese.

**AGE**

10

Mild to moderate lumbosacral intervertebral disc protrusion is seen. The herniated annulus fibrosis occupies the ventral epidural space level with the lumbosacral junction. No significant dorsal deviation or compression of the cauda equina nerve fibers is seen. A rim of epidural fat is maintained dorsal to the cauda equina. No evidence of neuroforaminal stenosis is noted.

Mild non-compressive intervertebral disc protrusions are present between L2 and L3 as well as between L6 and L7.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**MAGNETIC RESONANCE IMAGING DIAGNOSIS**

- Mild degenerative lumbosacral stenosis
- Mild intervertebral disc protrusions L2/3 and L6/7 – both non-compressive.

**HOSPITAL NAME**

Mountain West  
Veterinary Hospital

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The MRI study reveals mild degenerative lumbosacral stenosis with mild to moderate lumbosacral intervertebral disc protrusion. Cauda equina compression is not directly seen. The relatively mild MRI changes are unlikely to explain the severity of the patient’s clinical signs and other differential diagnoses such as degenerative myelopathy should be considered as underlying cause of the patient’s clinical signs.

**REFERRING VET**

Dr. Jeff Simmons

**INVOICE**

56561

**DATE**

2-2-23



**PATIENT**

Koda Ashurst

**SPECIES**

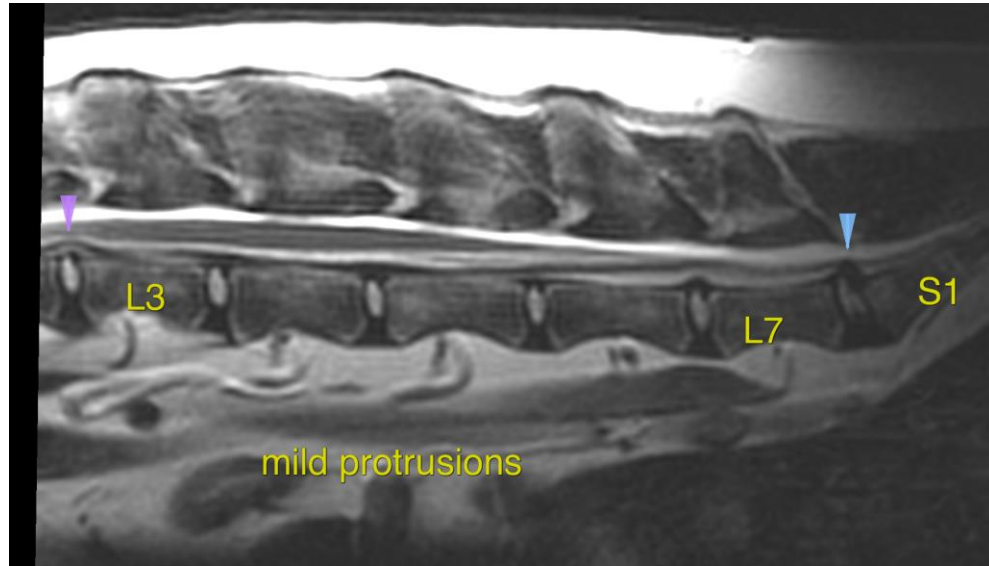
Canine

**BREED**

Doodle

**SEX**

MN



**AGE**

10

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.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

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  
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,  
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology  
Nele.Eley@sonopath.com

**HOSPITAL NAME**

Mountain West  
Veterinary Hospital

**REFERRING VET**

Dr. Jeff Simmons

**INVOICE**

56561

**DATE**

2-2-23