



PATIENT

Poppy McCue

SPECIES

Canine

BREED

Labradoodle

SEX

FN

AGE

5M

WEIGHT

10

INTERPRETED BY

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

IMAGING PERFORMED BY

Eamon

HOSPITAL NAME

Belconnen Veterinary
Centre

REFERRING VET

Eamon

INVOICE

74963

DATE

5-11-26

PRESENTING CLINICAL SIGNS

yelping in pain
refusing to shake
reduced appetite
Abnormal PE/Chem/CBC/UA Results: cbc/chem/crp w/

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX, ABDOMEN, THORACIC & LUMBAR SPINE

Plain and post IV contrast studies in soft tissue, lung, and bone windows are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern are uniform and considered within normal limits.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior.

Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.

Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration, a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The pancreas is evenly contoured; the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

Thoracolumbar Spine

A left sided ventral extradural compression lesion is present at the level of T11/12 within the caudal thoracic spine consisting of mineralized intervertebral disc material extruded into the left ventral



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vertebral canal. The lesion results in approximately 45% vertebral canal compression with marked dorsal and rightward spinal cord compression. The intervertebral disc space T11/12 is narrowed.

Multiple additional intervertebral discs demonstrate mineralization.

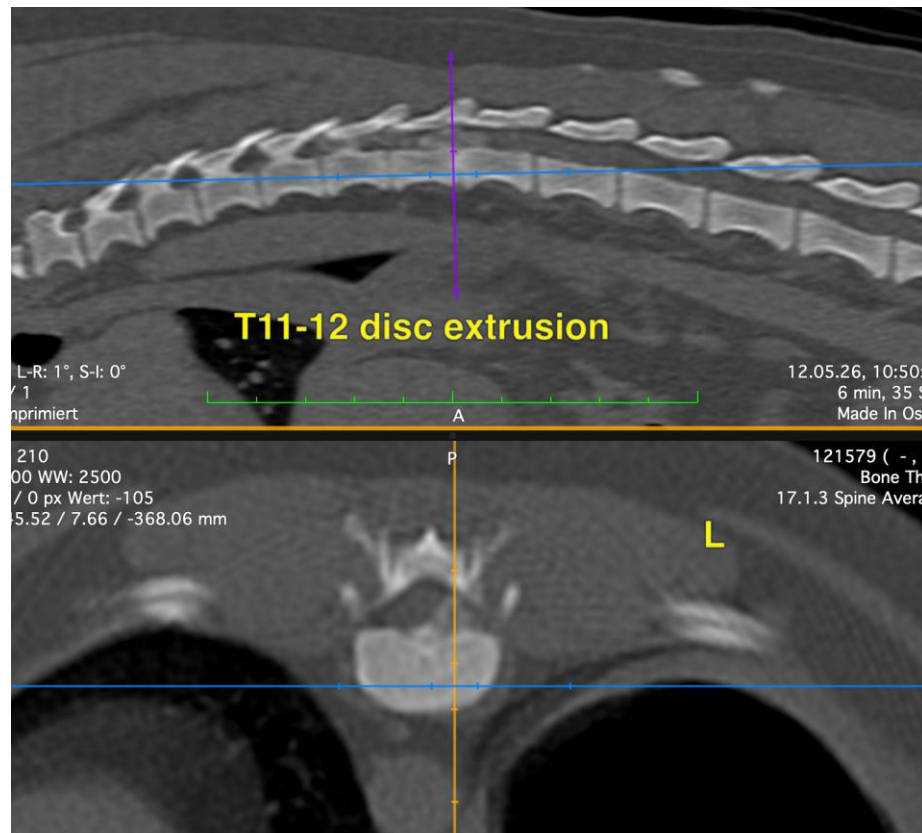
No significant spinal cord compression can be identified throughout the lumbar spine.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Acute mineralized intervertebral disc extrusion at T11/12 left ventral causing severe spinal cord compression.
- Multifocal premature intervertebral disc mineralization.
- No significant thoracic or abdominal abnormality identified.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The T11/12 disc extrusion is clinically significant and likely accounts for the patient's acute clinical signs. The presence of multiple mineralized discs at only 5 months of age is unusual and suggests early premature intervertebral disc degeneration with chondroid metaplasia. The degree of spinal cord compression is severe and carries risk for progression of neurologic dysfunction. Urgent neurosurgical consultation is recommended.





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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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