



PATIENT

Bella Johnston

PRESENTING CLINICAL SIGNS

Bella was out chasing cattle, yelped and was non-weight bearing on the hind right leg. prior to yesterday, possibly nonvisual in OD, hard of hearing, arthritis, worn teeth
 Abnormal PE/Chem/CBC/UA Results: SCLEROSIS NORMAL FOR AGE. GUARDED ABDOMEN ON THE TABLE, LATEROSTERNAL WITH RH UP. VERY PAINFULL TO HIP AND LOWER BACK PALPATION. CP LOSS RIGHT HIND. STABLE STIFLE, GUARDED TO EXTESION OF HIPS. WORN TEETH

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE LUMBAR SPINE

Multiple lateral and ventrodorsal views of the lumbar spine totaling 5 images available for review.

BREED

Australian Cattle Dog Mix

RADIOGRAPHIC FINDINGS

Spondylarthroses between L1/2 and L2/3 are seen.

SEX

Spayed

The intervertebral disc spaces L2/3 and L1/2 are narrow. The neighboring vertebral end plates present sclerosis. Spondylosis deformans is seen with ventral and bilateral osteophytes emerging from the vertebral end plates.

AGE

13 Years

Mineralized material is superimposed onto the vertebral canal and neuroforamen at L2/3. Partial mineralization of the vertebral canal / neuroforamen is seen at L5/6 as well.

There are mild spondyloses between T11/12, T12/13, T13/L1, L3/4, L5/6, and L7/S1.

INTERPRETED BY

Nele Eley, DVM
 Dr. med. Vet. DipECVDI

The coxofemoral joints present within age related normal limits.

RADIOGRAPHIC DIAGNOSIS

- Radiographic evidence of multiple sites of chronic intervertebral disc disease within the lumbar spine and lumbosacral junction.
- Cranial lumbar spondylarthroses.

HOSPITAL NAME

Elizabeth Animal Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

While the radiographic study suggests presence of chronic intervertebral disc disease at multiple sites within the lumbar spine and lumbosacral junction, the clinical history is more suggestive of acute or acute on chronic traumatic disc extrusion or fibrocartilaginous embolism with ischemic myelopathy. Nevertheless, chronic compressive myelopathy due to intervertebral disc disease, inflammatory, and neoplastic pathology cannot be ruled out entirely as differential diagnoses and an MRI would be required for further verification of the tentative diagnosis formed based on the clinical history and clinical neurologic deficits. Obtaining an MRI should be considered especially in case of persisting or deteriorating clinical signs.

REFERRING VET

Leon Anderson, DVM

INVOICE

52937

DATE

7-18-22



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SPECIES

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BREED

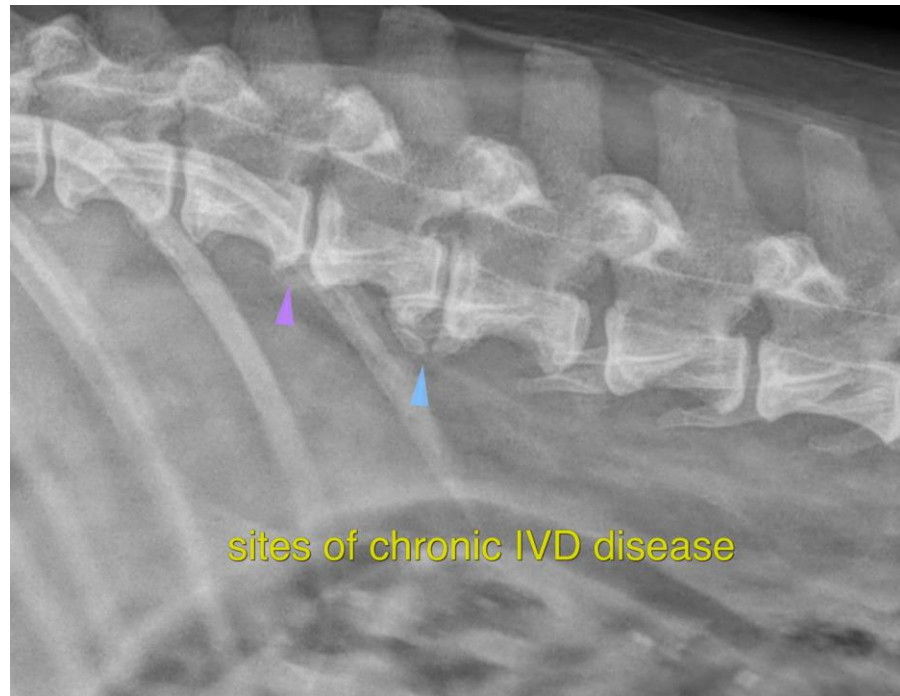
Australian Cattle Dog
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

HOSPITAL NAME

Elizabeth Animal
Hospital

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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