



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Zoey Fernicola

SPECIES Canine

BREED German Shepherd

Zoey has been reluctant to walk since 8-9 months old, but once she gets started she would be ok. Previous history of bilateral hip dysplasia (right worst than left, diagnosed 8/2/22), left TPLO (performed 8/15/22, plate removed 10/28/22, neg growth on culture). Pelvic limb ataxia has progressively gotten worst with scuffing of pelvic paws. Zoey has received one dose of Librela injection, but there was no improvement noted. She also received triamcinolone acetone injections into her joints. Mentation: Bright, alert and responsive. Cranial nerve exam: No deficits noted. Gait/posture: Ambulatory with mild ataxia and occasional medial stepping of left pelvic limb and external rotation of both pelvic limbs, no paresis. Postural reactions: Proprioceptive positioning moderately delayed in pelvic limbs, normal in fore limbs. Spinal reflexes: Normal. Sensory/nociception: moderate hyperesthesia elicited along lumbosacral palpation localization - L4-s3 myelopathy

MAGNETIC RESONANCE IMAGING STUDY OF THE THORACIC & LUMBAR SPINE

SEX FS

T2-fat saturated and non-fat saturated, plain and post contrast T1-weighted sequences in various image planes of the thoracic and lumbar spine are available for review.

MAGNETIC RESONANCE IMAGING FINDINGS

AGE 2.5 Years

Mild hypertrophy of the interarcuate ligament is seen at the lumbosacral junction. There is a minimal step formation between the last lumbar and first sacral vertebra. Focal loss of the nucleus pulposus signal is seen within its ventral portion. The remainder of the nucleus signal is maintained. No significant intervertebral disc protrusion is seen. The cauda equina fibers are embedded within epidural fat tissue and no evidence of deviation or compression is seen. There is no evidence of neuroforaminal stenosis.

The remainder of the thoracic and lumbar vertebrae and intervertebral discs are in situ.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Animal Health
Partners

Degenerative disc disease is seen between L5 and L6. Early degenerative changes of the facet joints are present within the cranial and mid lumbar spine. Mild facet joint tropism is seen in the caudal lumbar spine.

The signal and enhancement of the spinal cord and meninges are considered within normal limits.

REFERRING VET

Dr. Alison Little

MAGNETIC RESONANCE IMAGING DIAGNOSIS

- No significant lumbosacral stenosis noted.
- Normal age related thoracolumbar spine.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE 59152

DATE 7-4-23

The MRI study does not reveal significant lumbosacral or neuroforaminal stenosis. The minimal step formation and hypertrophy of the ligamentum flavum do not appear to cause significant stenosis with deviation or compression of the cauda equina nerves at this time. There is no evidence of changes of the nerve roots of the cauda equina. The thoracolumbar spine presents within age related normal limits as well. Genetic testing for degenerative myelopathy could be considered in this patient.



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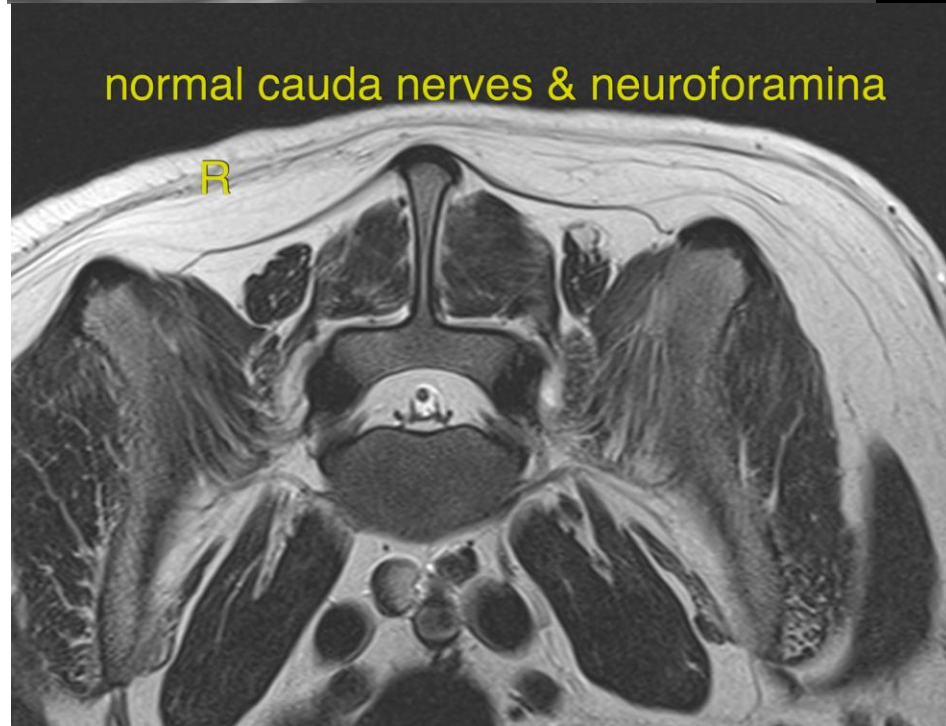
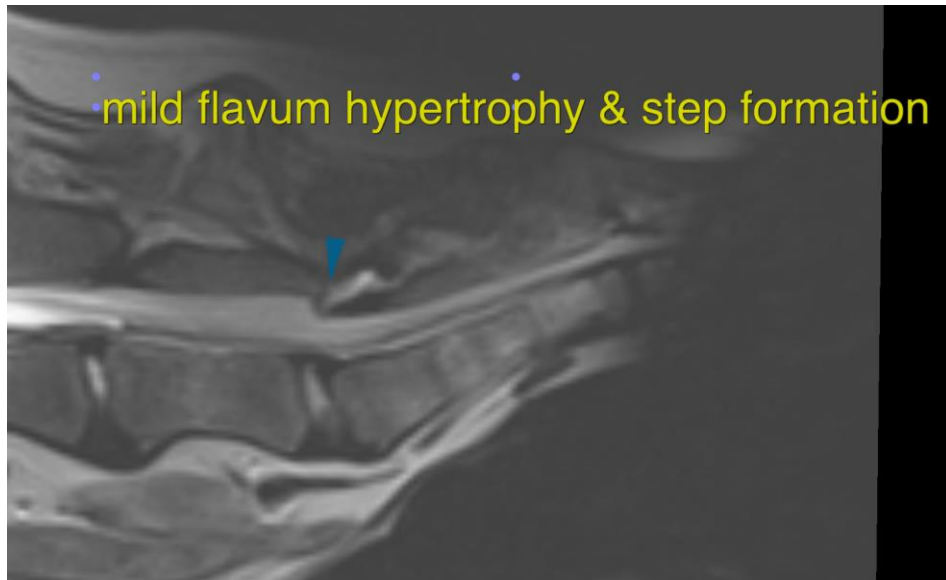
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

SPECIES

Canine

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