

**PATIENT**

Kahaleesi Ferro

PRESENTING CLINICAL SIGNS

Hind limb paresis both sides started 3 weeks ago, worsening. No signs of pain. Decreased patellar and withdrawl reflexes both, CPs normal. Perineal reflex seems slower but the anal spincter tone still seems good. Tail wags appropriately per O. urination/defection seems normal per O.

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE THORACOLUMBAR SPINE

Lateral and ventrodorsal views totaling 4 images available for review.

BREED

Labrador Retriever

RADIOGRAPHIC FINDINGS

There is moderate intervertebral disc space narrowing with vertebral end plate sclerosis and early spondylosis formation in the caudal lumbar spine at L5/6.

SEX

Female Spayed

T12/13 and T9/10, as well as T5/6 present spondylosis deformans as well.

Both coxofemoral joints present severe osteoarthritis changes secondary to moderate canine hip dysplasia.

AGE

8

The muscle volume in the gluteal region appears to be rather low in both hind limbs.

RADIOGRAPHIC DIAGNOSIS

- Chronic intervertebral disc disease L5/6.
- Multiple spondyloses.
- Severe coxofemoral osteoarthritis secondary to canine hip dysplasia in both hind limbs.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings suggest potential for intervertebral disc disease within the caudal lumbar spine at L5/6. Concurrent disc hernia cannot be ruled out; however, presence of compressive or other myelopathy within the thoracolumbar spine would require further definition by means of cross sectional imaging and in this patient ideally an MRI.

The severe coxofemoral osteoarthritis may contribute to the clinical signs as well. The option of cross sectional imaging could be pursued depending on the severity, duration, and development of the patients clinical signs.

HOSPITAL NAME

All Creatures Animal
Hospital of South Hill,
Inc.

REFERRING VET

Dr. Gonzales

INVOICE

46976

DATE

8-14-21



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SPECIES

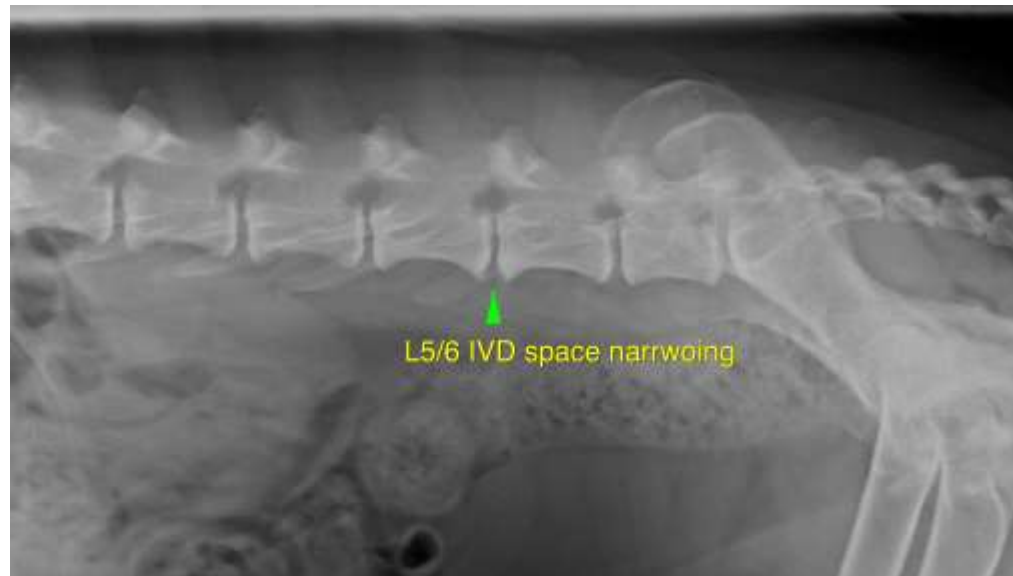
Canine

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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.

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

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