



PATIENT

Jack Higgins

PRESENTING CLINICAL SIGNS

P IS A 6Y6M OLD M/N FRENCH BULLDOG PRESENTING TODAY FOR CHECK LEG. O REQUESTS NAIL TRIM. CHECK BACK R LEG DRAGGING LEG NON WEIGHT BEARING DOES NOT APPEAR PAINFUL STARTED YESTERDAY. NO OTHER PROBLEMS/CONCERNS.

SPECIES

Canine

Musculoskeletal: Lameness in RH, dragging foot intermittently, sometimes weight bearing. Palpation of RH bones wnl. BCS 6/9 Neurological: CP present in all but RH, CNs intact

BREED

French Bulldog

RADIOGRAPHIC STUDY OF THE LUMBAR SPINE

Lateral and ventrodorsal views totaling 2 images available for review.

RADIOGRAPHIC FINDINGS

No evidence of vertebral malformation is seen within the lumbar spine.

SEX

Neutered Male

There is moderate intervertebral disc space narrowing with vertebral end plate sclerosis and bridging spondylosis at L5/6.

AGE

6 Years, 6 Months

Early spondylosis deformans is noted at L4/5.

Mineral opaque material appears to superimpose onto the caudal and ventral aspect of the L3/4 neuroforamen.

The vertebral facets in the mid lumbar spine are prominent.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

RADIOGRAPHIC DIAGNOSIS

- Radiographic evidence of intervertebral disc disease within the lumbar spine at L3/4, L4/5, and L5/6.

HOSPITAL NAME

DPC Veterinary Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes at L4/5 and L5/6 are more suggestive for chronic intervertebral disc disease with or without concurrent disc hernia. The possibility of mineralizing extrusion should be considered at L3/4. However, summation artifact and other cannot be ruled out entirely. Depending on the severity and development of the patient's clinical signs, further definition by means of cross sectional imaging such as CT or an MRI would be ideal in this patient.

REFERRING VET

Dr. White

INVOICE

46978

DATE

8-15-21



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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.

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