



## PATIENT

Freckle Smith

## SPECIES

Canine

## BREED

Lurcher

## SEX

F

## AGE

4Y, 14D

## WEIGHT

14kg

## INTERPRETED BY

Sebastian Jawinski,  
German Board  
Certified Vet Specialist  
in Diagnostic Imaging

## IMAGING PERFORMED BY

Ana

## HOSPITAL NAME

Animal Trust - Bolton

## REFERRING VET

Ana Valega

## INVOICE

72744

## DATE

11-25-25

## PRESENTING CLINICAL SIGNS

History: spayed at OV - 17th Oct built back up to exercise uncomfortable on a walk, uncomfortable sitting down and struggling to get up ongoing since then, seems to improve with rest already on BID paracetamol did scan and bloods at OV - nothing on scan, healing well lead walking once daily for 5-10 minutes; OR seeing "praying position" multiple times at home prev hx: hurt leg last year - LH, resolved completely after rest Diagnosis: open - musculoskeletal - HD? LS disease? patella luxation?

Abnormal PE/Chem/CBC/UA Results: Physical Examination/Findings: anxious, BAR mm p/m, crt 1-2s, dentition good cardiothoracic ausc nad abdo palp - tense but anxious, poss uncomfortable on deeper palpation in caudal abdomen neurologically normal, proprioception intact msk - good muscling, no heat/pain/swelling on manipulation of joints, reluctant to extend stifles/hips? but anxious so hard to interpret. able to luxate patellas but pop back in, reluctant for me to lift tail peripheral LNs wnl T 38.8

## COMPUTED TOMOGRAPHY OF THE PELVIS & STIFLES

Pre/post contrast studies are provided for review.

## COMPUTED TOMOGRAPHIC FINDINGS

The presented spine shows a harmonic course with inconspicuous vertebral bodies. Bone density is within normal limits. There are no signs of a lytic or sclerotic process noted. The thoracolumbar and lumbosacral transition are unremarkable. There is no evidence of a fracture or subluxation. The intervertebral discs spaces are of even diameter and inconspicuous. As far as can be assessed, a compressive lesion is not recognized.

The paravertebral soft tissues are bilaterally symmetrical, especially the course of the femoral and sciatic nerves is inconspicuous. Unilateral atrophy of the paraspinal and/or pelvic musculature is not noted.

The bony structures of the pelvis and the sacroiliac joints are unremarkable. There is no evidence of a lytic process noted. The coxofemoral joints are inconspicuous. There is no relevant formation of osteophytes recognized. The femoral head/neck formations are unremarkable with a congruent joint space. There are no signs of a lytic or sclerotic process. There is no evidence of a fracture or subluxation.

Both stifles are unremarkable without signs of relevant degenerative or reactive changes. The musculature of the thighs is symmetrical and shows no particular findings. A pathologic enhancement is not recognized.

The abdominal structures show no signs of an inflammatory, reactive or even neoplastic lesion. Free peritoneal fluid is not noted. The abdominal lymph nodes are inconspicuous.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Normal CT-findings of the displayed structures



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## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings do not explain the reported patient's history, especially signs of a compressive lesion in the course of the spinal cord and equine cauda are not recognized. Signs of a reactive or inflammatory process are not noted. This does not fully exclude functional issues as seen with muscular pain and instabilities or changes due to an ongoing improper load.





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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.

**Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging**  
[info@sonopath.com](mailto:info@sonopath.com)