



## PATIENT

Stoffoel Cheyenne

## SPECIES

Canine

## BREED

Dachshund

## SEX

Neutered Male

## AGE

10

## WEIGHT

15

## INTERPRETED BY

Sebastian Jawinski,  
German Board  
Certified Vet Specialist  
in Diagnostic Imaging

## IMAGING PERFORMED BY

Eamon

## HOSPITAL NAME

Belconnen VC

## REFERRING VET

Dr. Eamon

## INVOICE

35425

## DATE

11/6/25

## PRESENTING CLINICAL SIGNS

History: tense abdomen, shivering and reluctant to jump - duration 2 days  
Abnormal PE/Chem/CBC/UA Results: cbc normal raised alkp

## COMPUTED TOMOGRAPHIC STUDY OF THE THORACIC AND LUMBAR SPINE

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 atlanto-occipital and-axial transition are unremarkable. Multiple discs present a marked calcification of the nuclei.

At the level of Th13-L1, a severe disc herniation is noted at the level of the intervertebral disc space with hyperdense material in the spinal canal on the right lateral side, leading to severe compression of the spinal cord. The material distributes slightly to cranial and caudal.

There is no evidence of a fracture or subluxation. Another 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.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Disc herniation Th13/L1 with right-lateral spinal cord compression

Incidental findings:

- Asymmetric ventricles
- Unspecific hepatomegaly
- Mild mediastinal lymph adenomegaly
- Bilateral and mild osteoarthritis coxofemoral joints
- Degenerative findings of multiple discs

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings can explain the reported patient's history. The findings at the level of TH13-L1 likely represent an acute herniation, which would match with the symptoms of an acute onset and abdominal pain.

The incidental findings must be correlated with the clinical presentation. Signs of an active inflammatory process and/or neoplasia are not noted.



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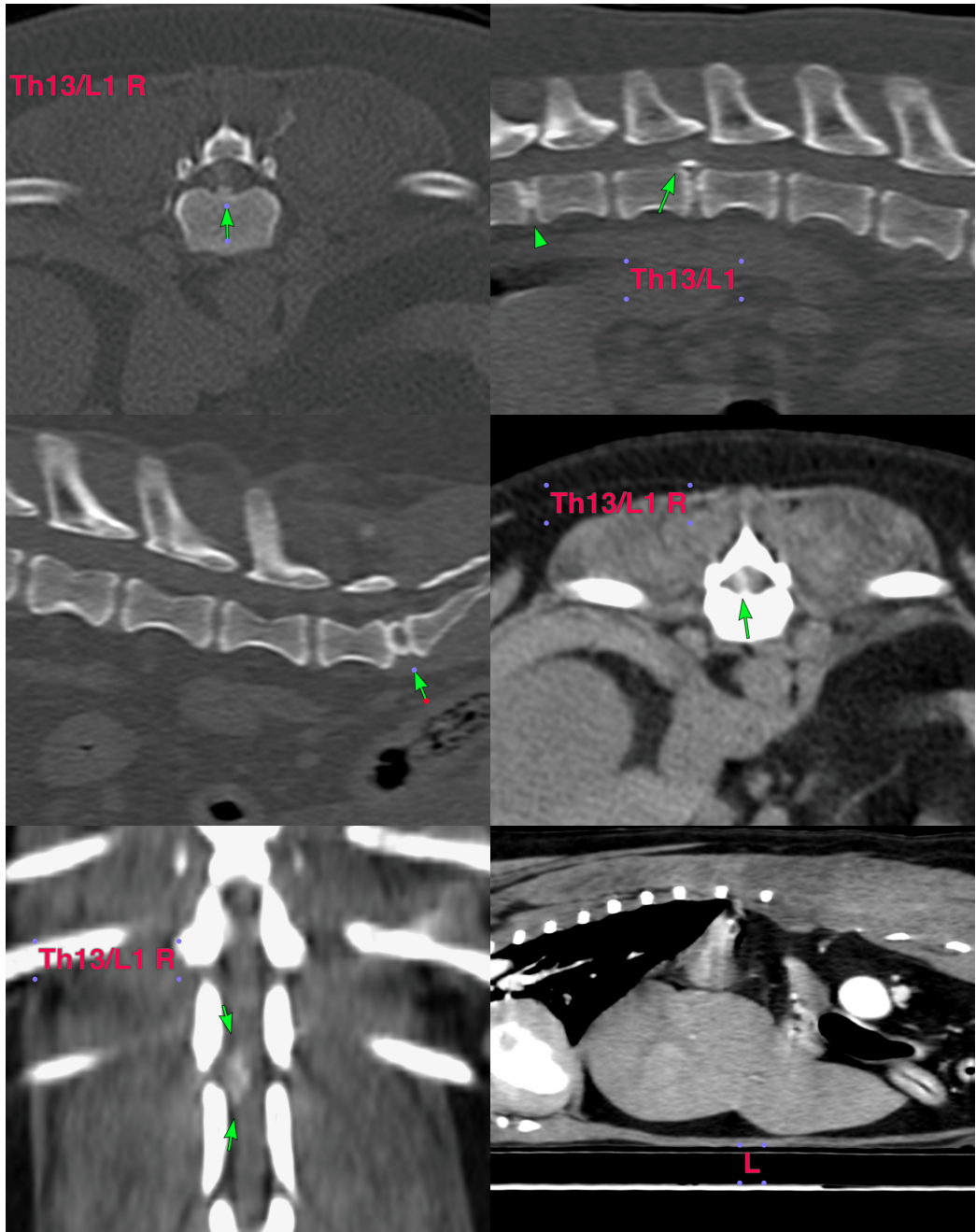
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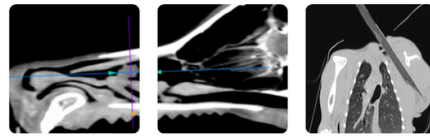
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



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