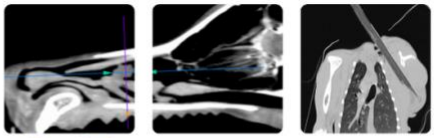

PATIENT

Rocco Hilgers

SPECIES

Canine

BREED

French Bulldog

SEX

Neutered Male

AGE

2

WEIGHT

25.2

INTERPRETED BY

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging

IMAGING PERFORMED BY

Valley Veterinary Associates

HOSPITAL NAME

Valley Veterinary Associates

REFERRING VET

Jonathan H.F. Davis, DVM

INVOICE

36635

DATE

4/17/26

PRESENTING CLINICAL SIGNS

History: Patient presented today for patella surgery. Upon physical exam patient asymmetry of lameness in both hind legs left being worse than the right. Performed neurologic exam where patient ataxic and not correcting hind feet appropriately. Concerned about potential spina bifida would like the entire thoracic and lumbar spine evaluated.

Abnormal PE/Chem/CBC/UA Results: previous bloodwork all normal. Physical exam patient asymmetry of lameness in both hind legs left being worse than the right. Performed neurologic exam where patient ataxic and not correcting hind feet appropriately.

COMPUTED TOMOGRAPHIC STUDY OF THE THORACIC & LUMBAR SPINE

The spine presents breed-expected malformations of the thoracic spine and the tail, showing multiple hemivertebrae without influence on the spinal canal. There are degenerative changes of the intervertebral discs noted at multiple levels, presenting moderate to severe calcifications of the nuclei.

There is a moderate protrusion of the disc C5-6 noted with mild dorsal elevation of the spinal cord.

Another calcified and subtle protrusion is noted at the level of Th12-13 without compressive signs.

In the course of the lumbar spine, multiple subtle protrusions are recognized.

The disc L3-4 and L5-6 show mild protrusions which appear broad-based, medial and slightly left-sided, leading to mild compression of the spinal cord at the level of L3-4 and L5-6.

The lumbo-sacral transition shows moderate degeneration of the discs without compression of the equine corda.

The paraspinal soft tissues are symmetrical and unremarkable. The displayed parts of the thorax and abdomen do not show particular findings. An aggressive lesion is not noted. Unilateral atrophy of the musculature is not recognized.

The bony structures of the pelvis and the sacroiliac joints are unremarkable. There is no evidence of a lytic process noted. There is no relevant formation of osteophytes recognized.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Breed-expected chondrodysplastic changes spine/tail
- Moderate degenerative changes nuclei at multiple levels
- Moderate protrusion C5-6 with mild compression of the spinal cord
- Mild protrusion L3-4 and L5-6 with mild compression of the spinal cord
- Subtle protrusion TH12-13 without compressive signs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings present multiple changes that could explain the reported patient's history. The protrusions of the lumbar spine may cause a higher grade of compression under dynamic conditions. Furthermore, intramedullary changes as seen with edematous lesions (for example FCE/HNPE lesions) cannot be fully excluded with CT and are still potential differentials.

A clearly defined focal compression that would justify surgery is not noted. Furthermore, it is difficult to determine which of these is more clinically relevant. Grade of compression as seen with CT is not

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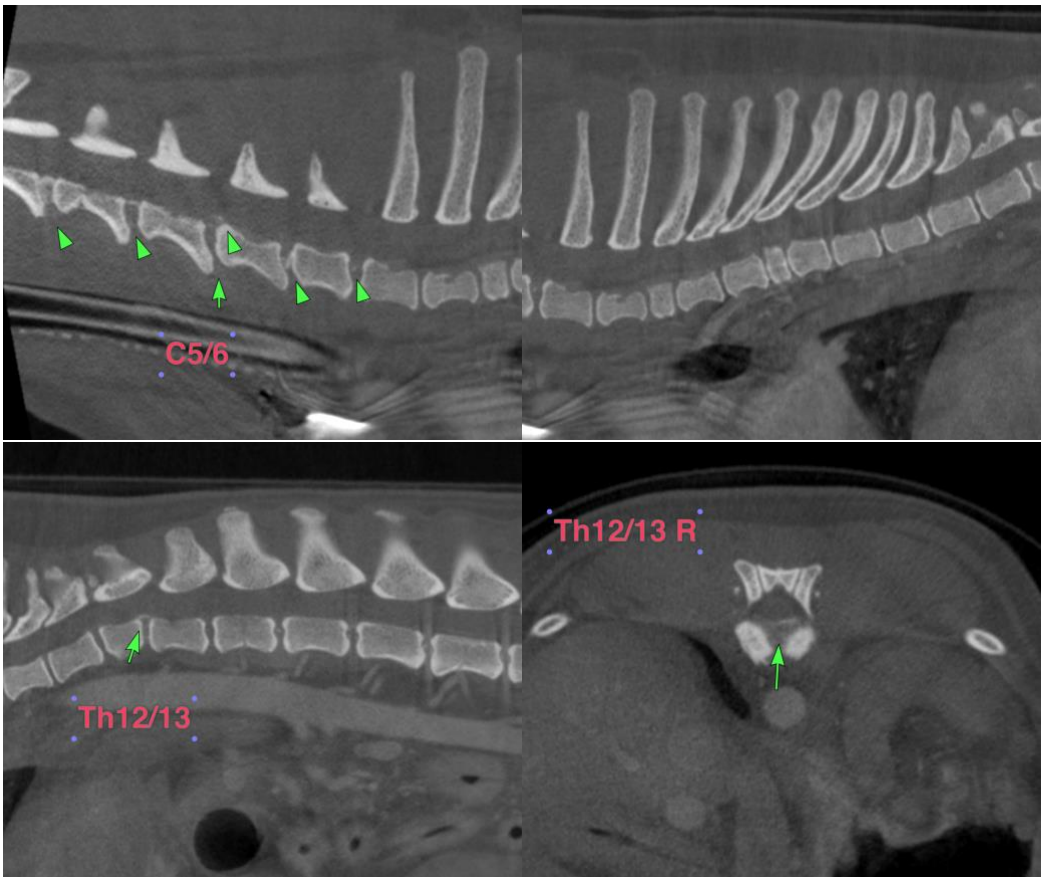
compellingly the most relevant clinical finding. Regarding the multiple findings, I would favor a conservative approach. A complementary MRI of the spine could be performed to rule out intramedullary lesions.



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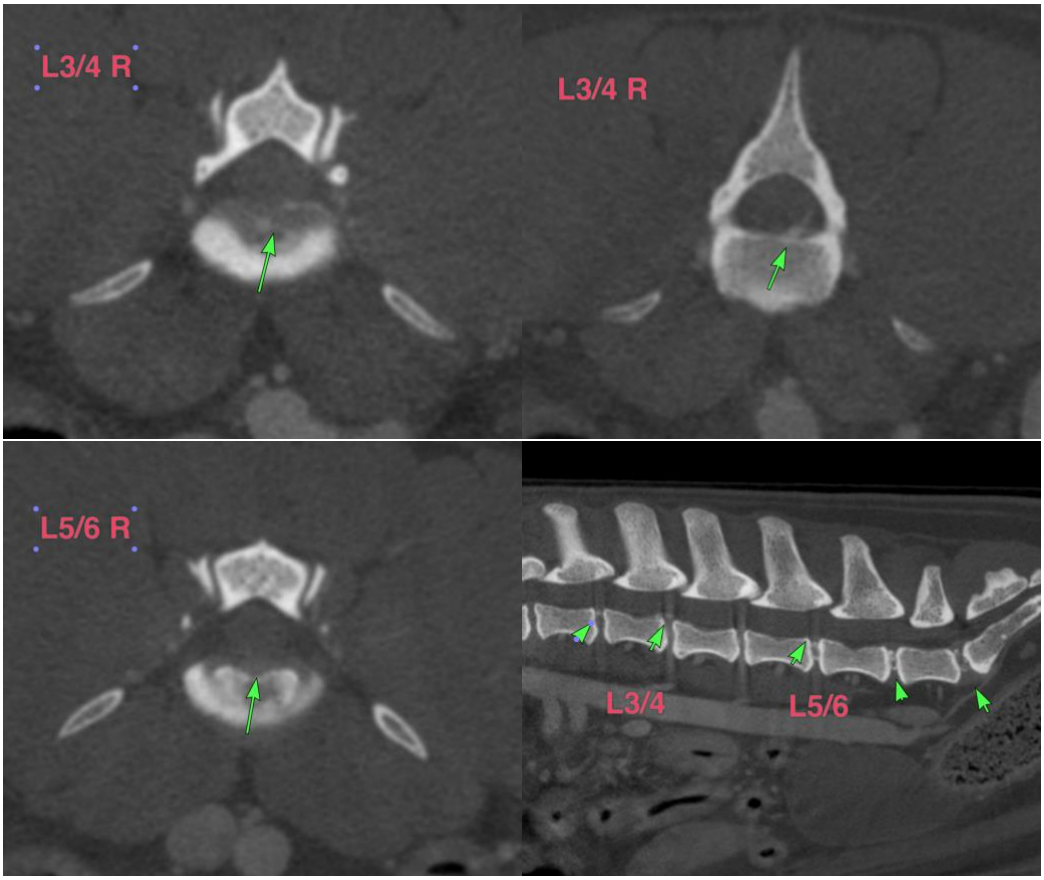

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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