



**PATIENT**

Molly Lin

**PRESENTING CLINICAL SIGNS**

Adopted with broken tail. Fecal incontinence reported. Sciatic gait stable. No pain noted at home. Localization cauda equina (from L6 nerves to caudal nerves) including bilateral sciatic nerve.

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC FINDINGS OF THE LUMBAR SPINE & TAIL**

There is moderate kyphosis noted in the mid-section of the lumbar spine predominantly caused by a synostosis of the vertebral bodies L3 and L4. The spinal canal widens over L3-L4. The thoracolumbar- and lumbosacral transition are inconspicuous. Vertebral bodies are of regular density without signs of a lytic or sclerotic process.

**BREED**

Shih Tzu

The tail kinks to the left with an angle of 90° at the level of the 4<sup>th</sup> and 5<sup>th</sup> segment. Malformation is of Cc4/5 is assumed.

**SEX**

Female

The spinal cord and the equine cauda/cauda fibers are central and homogeneous and show no compelling signs of a compressive lesion. Calcification of the nuclei is not recognized.

**AGE**

3 Months

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.

**INTERPRETED BY**

Sebastian Jawinski,  
German Board  
Certified Vet  
Specialist in  
Diagnostic Imaging

There is marked distension of the rectum recognized extending from intra-pelvin caudal to the pelvis ending with the anal sphincter.

The presented bony structures of the pelvis and both thighs are age appropriate from a CT perspective.

**HOSPITAL NAME**

Animal Health  
Partners

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Synostosis L3/L4 with moderate kyphosis
- Malformation of the tail Cc4-5
- Megacolon/-rectum

**REFERRING VET**

Dr. Marchal

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

CT findings show malformations of the lumbar spine and the tail. A compressive lesion is not recognized. The sciatic nerves appear symmetrical as far as can be assessed in a native study. At least there is no unilateral muscle atrophy noted. Both -synostosis and malformation of the tail- show no evidence of a former trauma/fracture etc. The latter however cannot be fully excluded but are very unlikely. Inflammatory changes, intraaxial lesions such as small edema due to contusion and/or scar tissue are difficult to recognize in a native CT and therefore not ruled out completely.

**INVOICE**

47039

**DATE**

8-19-21



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**SEX**

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**AGE**

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**REFERRING VET**

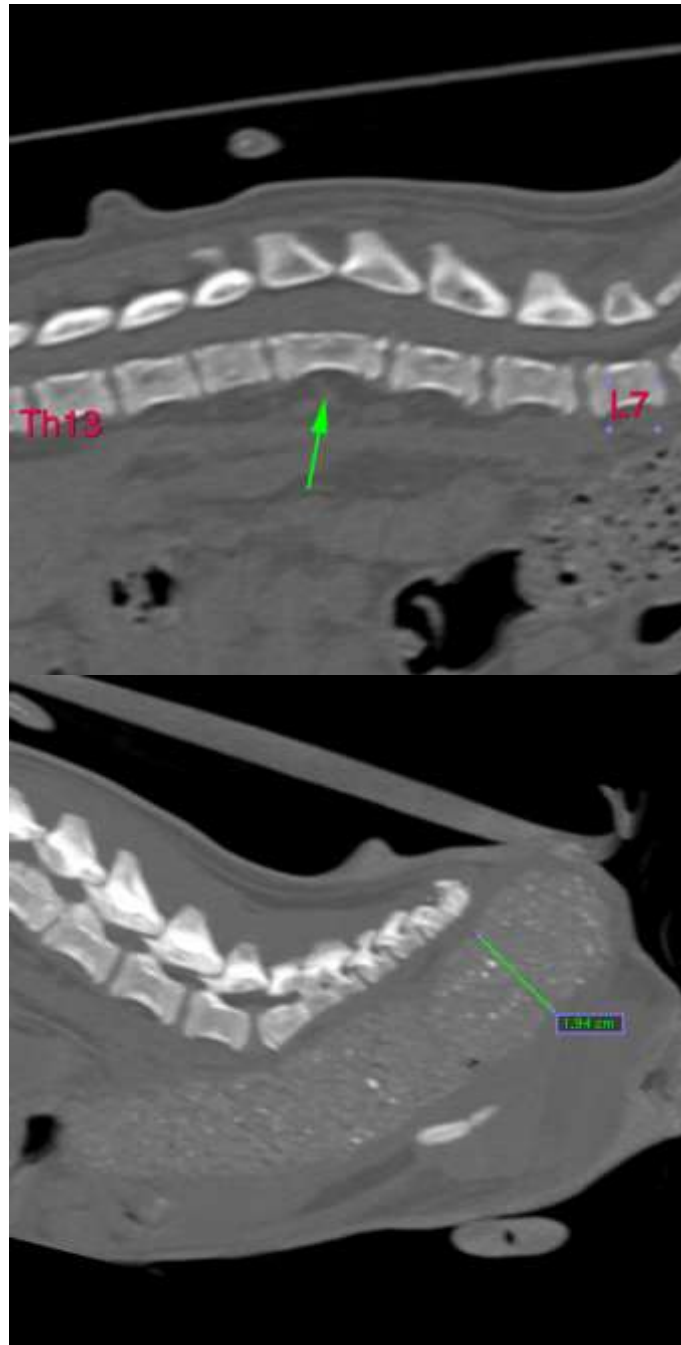
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**HOSPITAL NAME**

Animal Health  
Partners

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**  
Sebastian.Jawinski@sonopath.com

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