



PATIENT

Tigger Munro

PRESENTING CLINICAL SIGNS

Neurological examination Mentation: QAR Posture: hunched, reluctant to stand Gait: abnormal gait ; pelvic limb paresis -marked with pelvic limb ataxia -moderate; absent tail tone Cranial nerve exam: normal cranial nerve exam Spinal reflexes: withdrawal reflex is normal in all limbs and patellar reflex is absent in both pelvic limbs Proprioceptive positioning: delayed positioning in both pelvic limbs Anal tone: weak anal tone Sensory: Back pain localized at caudal lumbar with no neck pain. Nociception: Absent pain sensation on the tail Late afternoon - owners saw Tigger jump over the fence; swaying in the limbs, ran into the house Panting excessively with her mouth open, went downstairs into the baseline, urinated and defecated Sat down and then didn't really want to move Breathing normalized after about 10-15 minutes Would not eat or drink

SPECIES

Feline

BREED

Persian

COMPUTED TOMOGRAPHIC FINDINGS

SEX

FS

Caudal Thoracic & Lumbar Spine / Sacrum:

Presented bony structures of the spine are unremarkable with an inconspicuous harmonic thoracolumbar- and lumbosacral transition.

AGE

4 Years

There is a subtle protrusion at the level of L7/S1 noted without compressive signs.

Vertebral bodies are of regular density without signs of a fracture, lytic or sclerotic process.

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet
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Diagnostic Imaging

There is luxation of the tail caudal to the sacrum recognized with mild dorsal and caudal displacement of the tail.

Pelvis:

The left sacroiliac joint presents luxation. Fractures of the right pubic and ischiatic bone are noted each with mild displacement. Pelvic diameter is mildly narrowed.

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The abdomen reveals a small amount of free peritoneal fluid.

Soft tissues of the caudal pelvis present marked hematoma.

REFERRING VET

Dr. Marchal

The urinary bladder is highly filled.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Sacroiliac luxation on the left, correspondent fractures of the pubic and ischiatic bone on the right with mild narrowing of the pelvic diameter
- Luxation of the tail caudal to the sacrum
- Mild protrusion L7/S1 without compression of the equina cauda
- Soft tissue lesion/hematoma pelvis
- Mild ascites/abdominal hemorrhage
- Highly filled urinary bladder

INVOICE

47212

DATE

8-30-21



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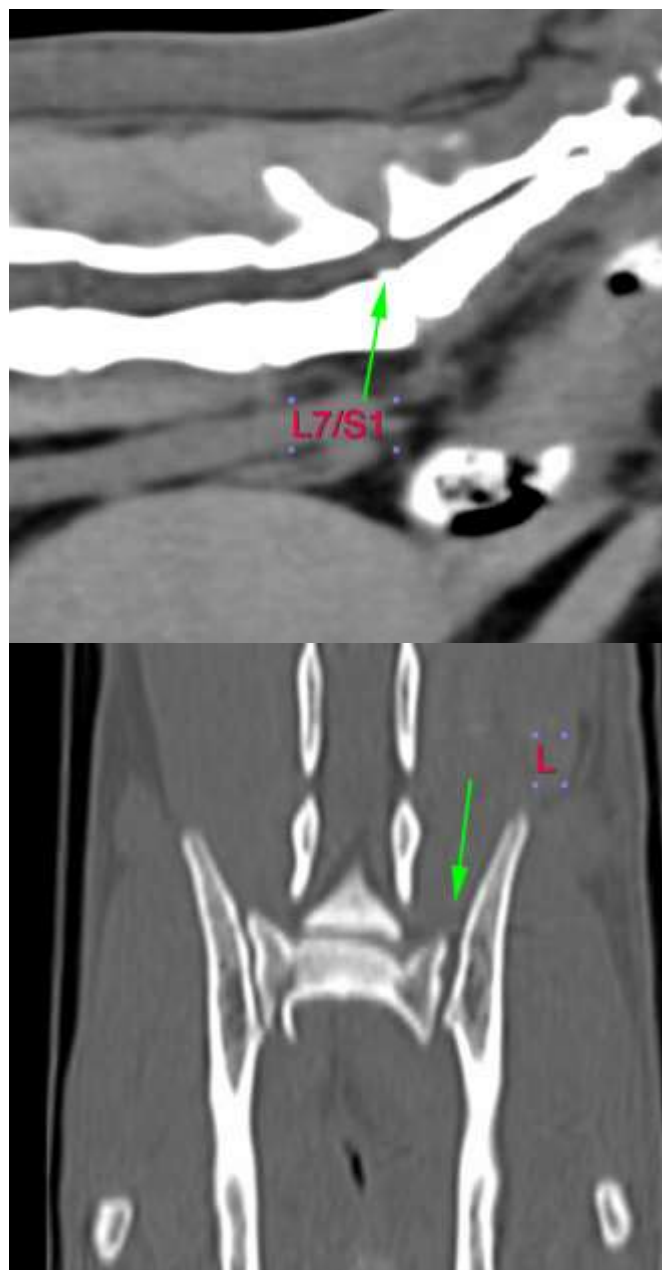
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT findings do match with the clinical presentation and are most likely due to pelvic trauma. Hindlimb paresis, anal tone and micturition need to be controlled before a surgical intervention (tail amputation). The sacroiliac luxation and the pelvic fractures could be treated conservatively if deficits improve. The described neurologic deficits have a bad prognosis. Urinary catheter is recommended. Please recheck the amount of peritoneal fluid.





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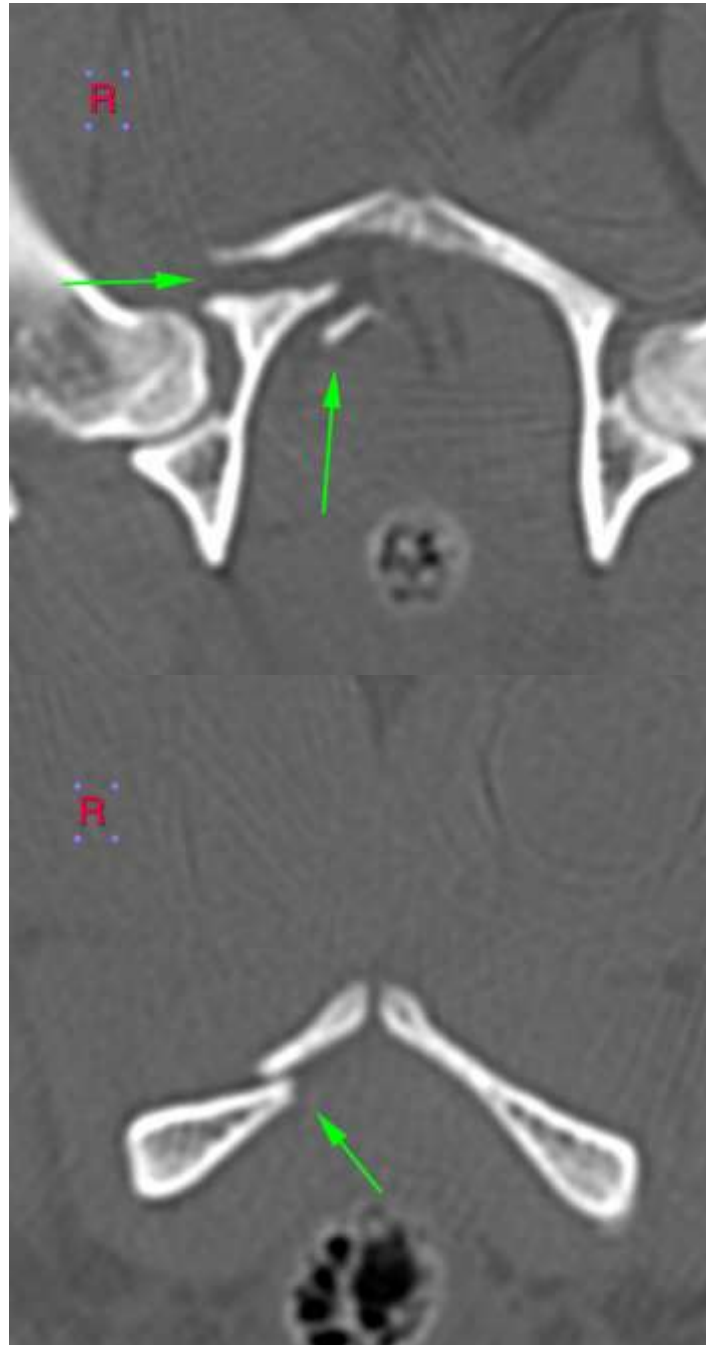
Dr. Marchal

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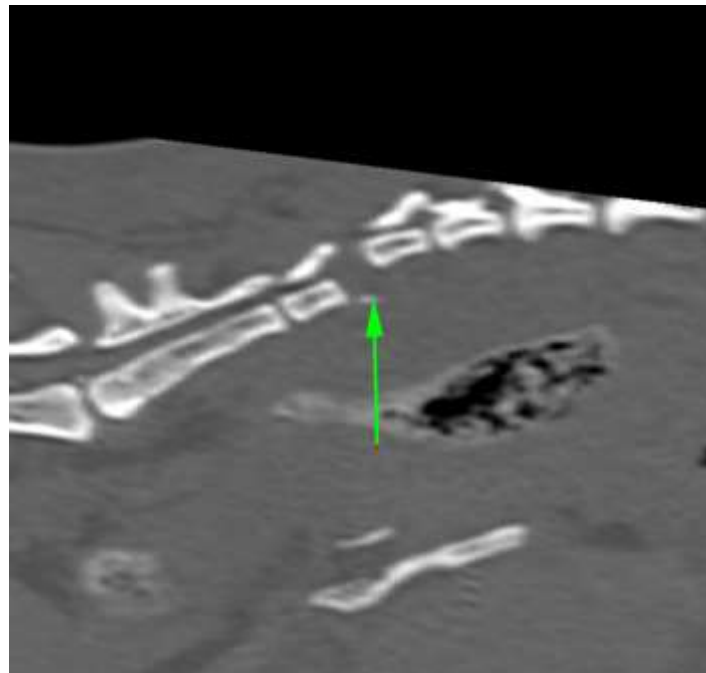
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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