

PATIENT

Doug Passfield

SPECIES

Canine

BREED

Pug

SEX

Neutered Male

AGE

3

WEIGHT

6

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Eamon

HOSPITAL NAME

Belconnen VC

REFERRING VET

Dr. Eamon

INVOICE

35455

DATE

1/16/26

PRESENTING CLINICAL SIGNS

History: progressive hind limb ataxia - localizing to t3l3
Abnormal PE/Chem/CBC/UA Results: cbc/chem/t4 pending

COMPUTED TOMOGRAPHIC STUDY OF THE CERVICAL, THORACIC AND LUMBAR SPINE

A pre- and post-contrast CT study of the entire spine in a bone and soft tissue reconstruction is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

The vertebral endplates C6/C7 present mild spondylosis formation.

Post intrathecal contrast administration, level with the intervertebral disc space C6/C7, disc material is distorting the ventral subarachnoid space at the same level. The remainder of the osseous and soft tissue structures of the cervical spine reveal no abnormalities.

Congenital malformation of T5 to T9 is appreciated and the mid segment of the thoracic spine presents kyphotic kinking of approximately 80° level with T7/T8. The vertebral canal level T7 and T8 is dorsoventrally flattened by approximately 50%. Post intrathecal contrast administration, the spinal cord level T7&T8 is dorsoventrally flattened and distorted.

The caudal segment of the thoracic spine reveals no abnormalities of the osseous and soft tissue structures.

The osseous and soft tissue structures of the lumbar spine are unremarkable.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Congenital malformation T5 to T9 with segmental kyphotic kinking of the mid segment of the thoracic spine and vertebral canal stenosis level T7 and T8
- Secondary compressive myelopathy level T7 and T8
- Intervertebral disc herniation C6/C7 with possible dynamic myelocompression
- Mild spondylosis deformans C6/C7
- Normal lumbar spine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The vertebral canal stenosis secondary to the vertebral malformation T7 and T8 is a plausible explanation for the presenting clinical signs. Possible surgical treatment options may be discussed with neurosurgeon/orthopedic surgeon as there is an inherent risk to induce instability.



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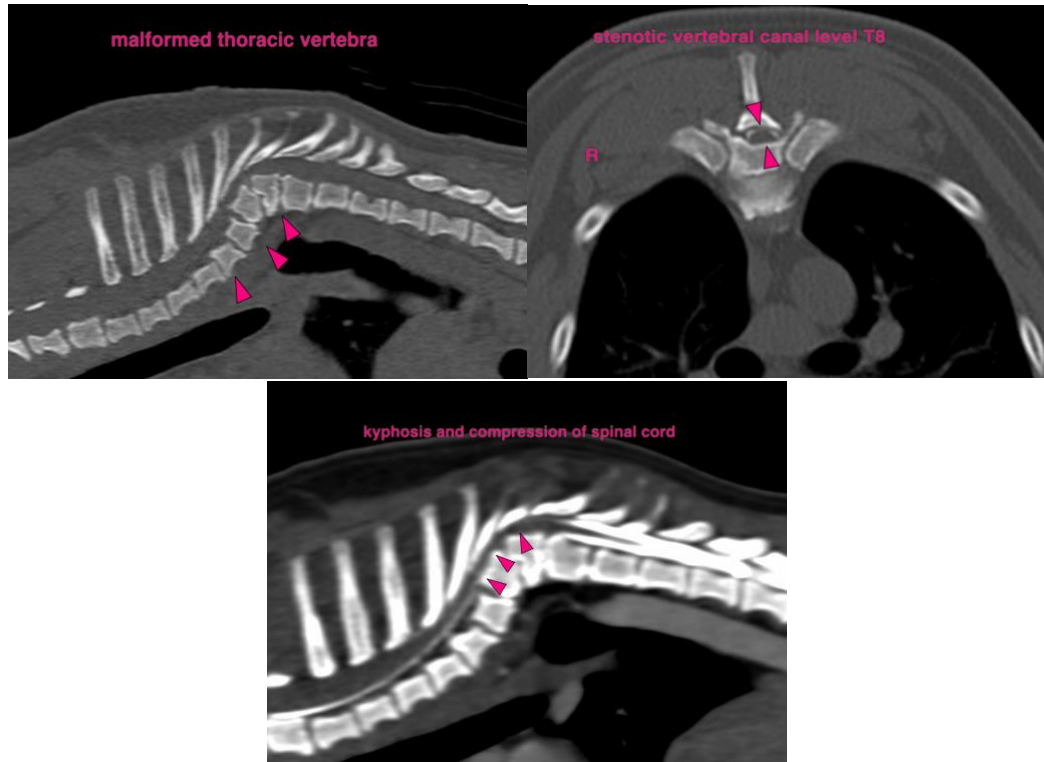
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com