



## PATIENT

Rock Lopez

## SPECIES

Canine

## BREED

American Bully

## SEX

Male

## AGE

3Y

## WEIGHT

44lbs

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet.  
DipECVDI

## IMAGING PERFORMED BY

Cesar Claro

## HOSPITAL NAME

Westchester Animal  
Hospital

## REFERRING VET

Randy Dominguez

## INVOICE

73394

## DATE

1-20-26

## PRESENTING CLINICAL SIGNS

History:

- Referred from Pets and Hearts Animal Clinic with a Non ambulatory paraplegia. No deep pain at P.E

Abnormal PE/Chem/CBC/UA Results: Unremarkable

## COMPUTED TOMOGRAPHY OF THE CERVICAL, THORACIC AND LUMBAR SPINE

A high resolution plain and myelographic CT study of the entire spine is provided for review.

### COMPUTED TOMOGRAPHIC FINDINGS

The osseous and soft tissue structures of the cervical spine reveal no abnormalities, but central mineralization of the intervertebral disc C7/T1.

Multiple intervertebral discs along the thoracic & lumbar spine present variable degree of central mineralization. The remainder of the osseous and soft tissue structures of the thoracic spine are unremarkable.

The intervertebral disc L1/L2 is bulging into the vertebral canal, occupying approximately  $\leq 10\%$  of the cross-sectional area of the vertebral canal at the same level.

The intervertebral disc space L3/L4 is mildly narrowed. In the left ventral aspect of the vertebral canal level L3/L4, mild hyperattenuating material is appreciated, occupying approximately  $\leq 15\%$  of the cross-sectional area of the vertebral canal at the same level. The hyperattenuating material level L3/L4 is extending cranially over the caudal third of the vertebral body L3 and caudally over the caudal third of the vertebral body L4. Post intrathecal contrast administration the subarachnoid space L3/L4 is distorted along with very mild distortion of the spinal cord.

No additional abnormalities of the osseous and soft tissue structures of the lumbar spine are seen.

### COMPUTED TOMOGRAPHIC DIAGNOSIS

- Left sided intervertebral disc extrusion L3/L4 with very mild myelocompression
- Intervertebral disc protrusion L1/L2 without myelocompression
- Multifocal chondroid disc degeneration along the entire spine

### INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although the discopathy L3/L4 is considered as the clinically relevant finding, the amount of extradural disc material is only very small and the odds for underlying acute non-compressive nucleus pulposus extrusion are high. An ischemic insult may be a differential. Conservative management is considered beneficial here. If neurological status is progressively declining, workup can be complemented by an MRI study to check for signs of myelomalacia.



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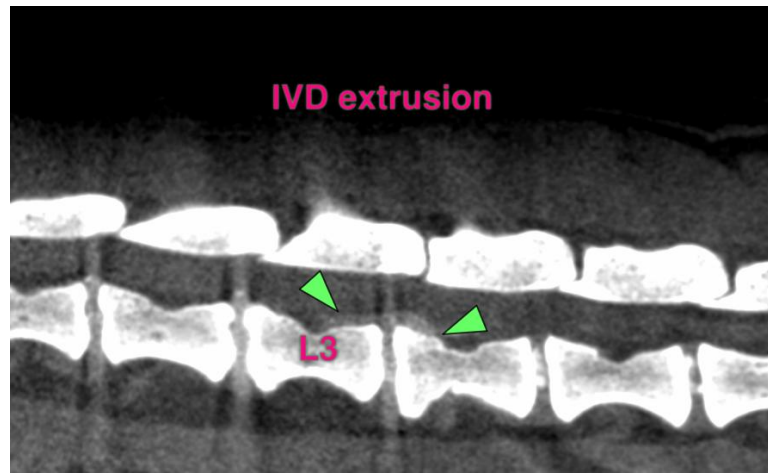
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
[info@sonopath.com](mailto:info@sonopath.com)