



## PATIENT

Sebastian Wardell

## SPECIES

Canine

## BREED

Shih Tzu

## SEX

Male

## AGE

7 Years

## WEIGHT

13.4

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

## IMAGING PERFORMED BY

Armando Sobrando

## HOSPITAL NAME

Miami Springs AH

## REFERRING VET

Dr. Andres Perez

## INVOICE

35582

## DATE

1/23/26

## PRESENTING CLINICAL SIGNS

- Low proprioception left arm
- Thoracic and lumbar spine pain

## COMPUTED TOMOGRAPHIC STUDY OF THE CERVICAL, THORACIC AND LUMBAR SPINE

A high resolution pre- and post-contrast CT study of the entire spine is provided for review.

## COMPUTED TOMOGRAPHIC FINDINGS

Dorsal angulation of the odontoid peg is appreciated.

The intervertebral disc spaces C4/C5 and C5/C6 are moderately narrowed. Level with the respective intervertebral disc spaces C4/C5 and C5/C6 mild hyperattenuating material is protruding into the vertebral canal, occupying approximately  $\leq 10\%$  of the cross-sectional area of the vertebral canal at the same level.

The spinous process of T1 is incompletely fused in the midline.

The intervertebral disc space T12/T13 is moderately narrowed.

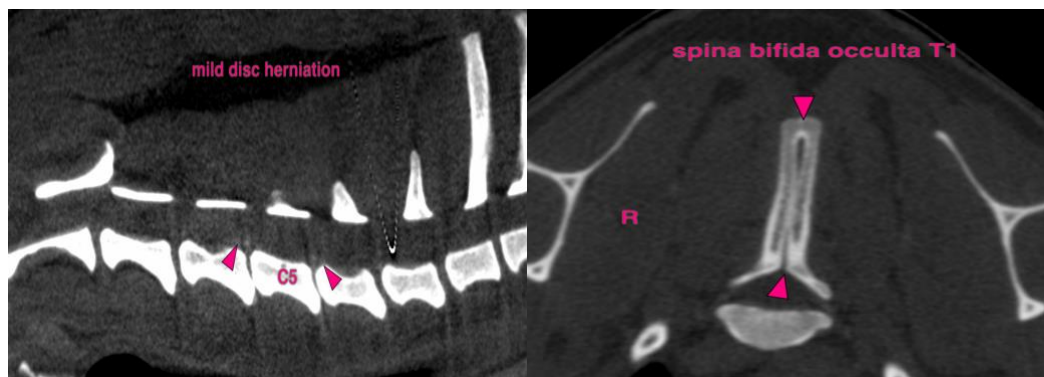
The remainder of the osseous and soft tissue structures of the cervical, thoracic and lumbar spine are within normal limits.

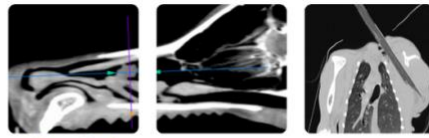
## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Intervertebral disc herniation C4/C5 and C5/C6 without overt myelocompression
- Discopathy T12/T13
- Mild dorsal angulation of the odontoid peg
- Spina bifida occulta T1
- Normal lumbar spine

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals no specific abnormality, that does explain the presenting clinical signs. The appreciated disc herniation are only mild and unlikely to be related with neurological deficits – but may be a source for dynamic spinal pain. If there is strong suspicion for extradural myelocompression, workup can be complemented by a myelographic CT study or MRI study of the spin.





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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](mailto:info@sonopath.com)