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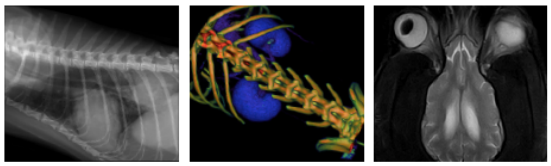

PATIENT

Hunter Dickson-Hunt

SPECIES

Canine

BREED

Labrador Retriver

SEX

Neutered Male

AGE

9 Years 1 Month

INTERPRETED BY

Sebastian Schaub, DVM Dr. med. vet. DipECVDI

HOSPITAL NAME

Animal Health Partners

REFERRING VET

Dr. Alison Little

INVOICE

43423

DATE

10/27/22

PRESENTING CLINICAL SIGNS

Acute trauma causing right forelimb lameness in January. At that time noted mast cell tumor on right forelimb and infection after removal that was treated with antibiotics and wet to dry bandages for a few weeks. Seemed to recover. August developed a two engine gait that has progressively been worsening.

MAGNETIC RESONANCE IMAGING OF THE CERVICAL SPINE

T2&T1 (DIXON) and T1 pre- and post-gadolinium sequences in multiple imaging planes are provided for review.

MAGNETIC RESONANCE IMAGING FINDINGS

The intervertebral discs C2/C3 and C3/C4 are mildly protruding into the vertebral canal, distorting the ventral epidural space at the same level. The intervertebral disc C6/C7 is mild to moderately bulging into the vertebral canal, mildly deviating the spinal cord at the same level dorsally.

Level with the left neuroforamen C6/C7, in the left aspect of the vertebral canal, a T2 and STIR hyperintense, T1 hypointense and non-contrast enhancing ovoidal shape lesion, measuring 8.0 x 3.4 x 5.5 mm in size is appreciated. The spinal cord at the same level is deviated to the right and distorted. A second small lesion with the same signal behavior is appreciated associated with the left lamina of C5. A focal T2 hyperintense signal is noted in the left ventral aspect of the spinal cord level C6/C7.

The intervertebral discs along the cervical spine present decreased signal of the in fluid sensitive sequences hyperintense nucleus pulposus – most accentuated along the caudal cervical spine.

Both shoulder joints present a moderate intracapsular swelling. The right subscapularis muscle presents a T2 and STIR heterogeneous hyperintense signal behavior and moderately decreased volume – accentuated along the distal segment of the right subscapularis muscle. Post contrast administration, the right subscapularis muscle presents a moderate diffuse contrast enhancement.

MAGNETIC RESONANCE IMAGING DIAGNOSIS

- Intervertebral disc protrusion C6/C7 with possible dynamic compressive myelopathy
- T2 hyperintense intramedullary lesion left ventral aspect of spinal cord level C6/C7
- Suspect juxta-articular facet joint cysts C5 and C6/C7 with evidence of mild myelocompression C6/C7
- Chronic myopathy right subscapularis muscle
- Articular swelling shoulder joints bilaterally

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The intervertebral disc protrusion C6/C7 can be associated with dynamic myelocompression and might be a source for the described clinical signs to cervical spondylomyelopathy. The suspected juxta-articular facet joint cyst C6/C7 can contribute to clinical signs as well. The focal intramedullary hyperintensity of the spinal cord level C6/C7 can present a zone with gliosis – either secondary to repetitive spinal cord compression or ischemic myelopathy.

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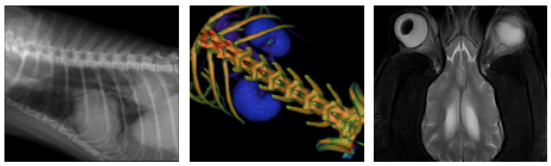

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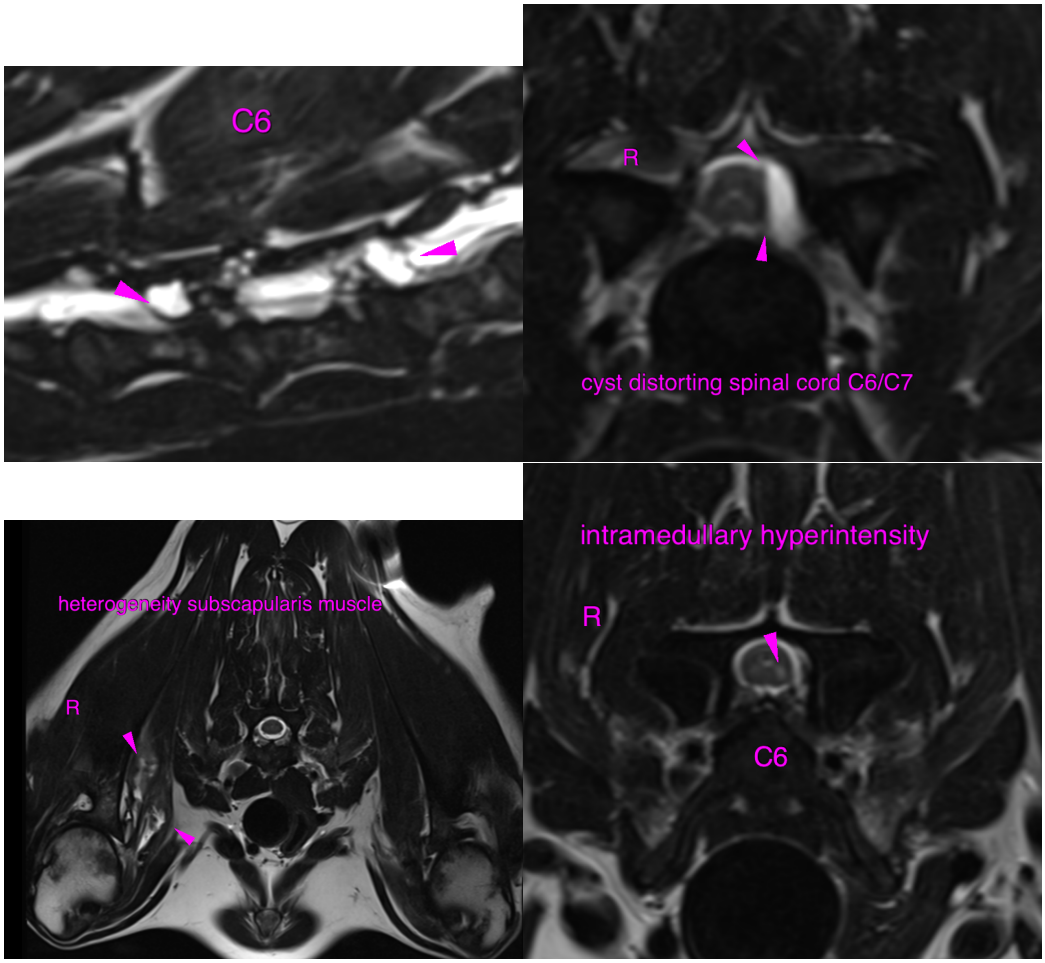
The appreciated changes of the right subscapularis muscle are most consistent with muscle strain/laceration of the subscapularis muscle.



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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
sebast.schaub@gmail.com