



PATIENT

Eevee Fong

SPECIES

Canine

BREED

Corgi, Welsh
Pembroke

SEX

F

AGE

5 Years, 10 Months

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

South Bay Animal
Hospital

REFERRING VET

Ravinder Atwal, DVM,
CCRP

INVOICE

48049

DATE

10-27-21

PRESENTING CLINICAL SIGNS

Paraparesis, deep pain positive, superficial pain very weak in the pelvic limbs, patellar reflexes bilaterally, anal tone intact & cutaneous trunci positive beyond L5. Unable to urinate for a few days last week and had a cystocentesis done at the rDVM on the weekend. Radiographs performed at rDVM, images and complete report unavailable. Medical record indicates multiple sites of TL degeneration, rest NSF. Rule Outs: IVDD; inflammatory, neoplasia less likely
Localization: T3-L3 myelopathy
Abnormal PE/Chem/CBC/UA Results: rDVM: UA & CBC/CMP – NSF

MAGNETIC RESONANCE IMAGING OF THE THORACIC & LUMBAR SPINE

T2 weighted, STIR, HASTE, T1 pre- and post-gadolinium sequence in multiple planes are provided for review.

MAGNETIC RESONANCE IMAGING FINDINGS

Level with the intervertebral disc space L1/L2, in the right ventral aspect of the vertebral canal heterogeneous T2 hyper- to hypointense material is visible occupying approximately up to 50% of the cross-sectional area of the vertebral canal at the same level. The spinal cord at the same level is displaced to the left and distorted. The heterogeneous material is extending cranially and caudally over the complete length of the respective vertebral bodies of L1/L2. Post contrast administration the material in the vertebral canal level L1/L2 presents moderate contrast enhancement.

A generalized moderate to marked loss of the in fluid sensitive sequences hyperintense signal of the nucleus pulposus along the thoracic & lumbar spine is present.

MAGNETIC RESONANCE IMAGING DIAGNOSIS

- Intervertebral disc extrusion L1/L2 with compressive myelopathy
- Generalized degenerative disc disease thoracic & lumbar spine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are compatible with intervertebral disc extrusion L1/L2 with compressive myelopathy from the right aspect. The disc material is extending cranially and caudally over the complete length of L1&L2 respectively. The finding explains the clinical signs, surgical decompression is recommended.



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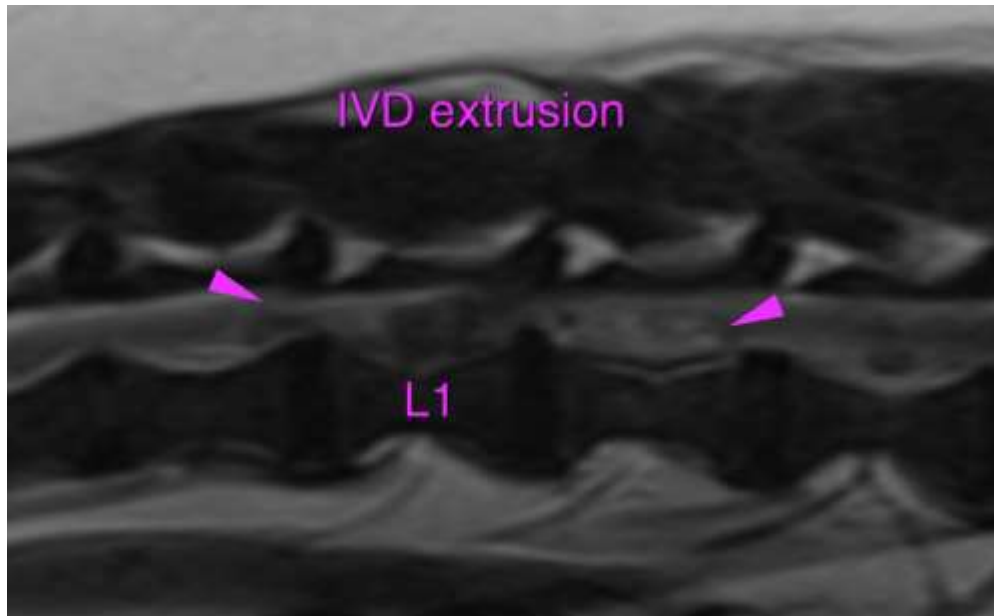
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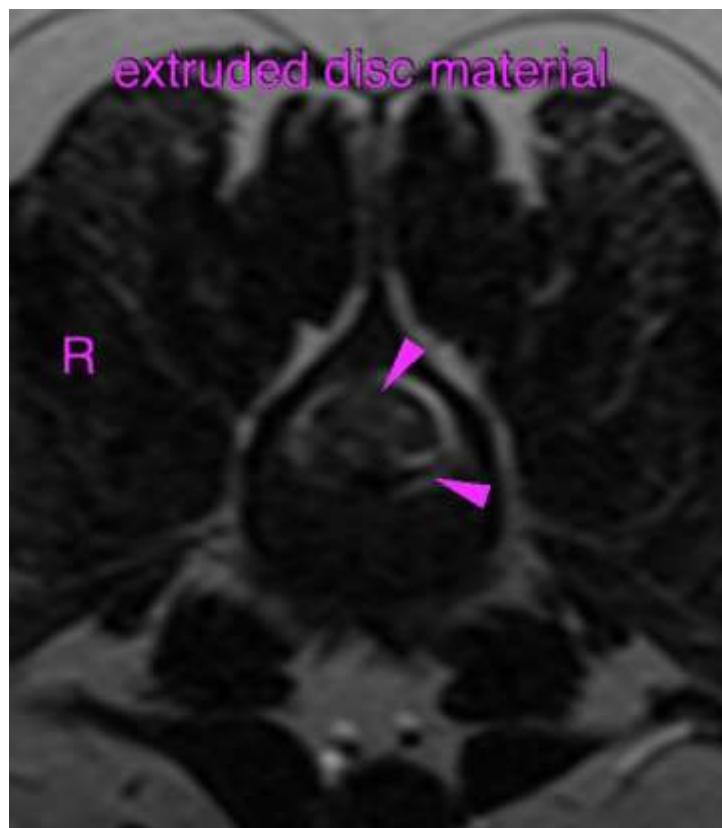
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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

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