



**PATIENT PRESENTING CLINICAL SIGNS**

Riley Chyczij  
 Riley was at vet for vaccines 1.5 weeks ago, and vet noted dental disease. He went to Pearly Whites in Barrie for "anesthesia-free" dental. Owner was told that 'mentally' this was a difficult cleaning for Riley. When owner brought him out from the car, he could no longer walk at 4 PM. He laid in bed without urinating or eating all evening in 1 spot. Owner carried him outside this morning, and he could not stand, which is when owner brought him to Huronia AH. General physical examination: Mature cataract OU Heart murmur Grade 3/6 left sided Clear lungs Neurological examination: Mentation: Quiet, and responsive. Cranial nerve exam: Absent menace and PLR OU (susp. due to ocular changes), otherwise unremarkable Gait/posture: Non-ambulatory with severe tetraparesis. Unable to make any voluntary steps in any of the limbs when supported. Unable to right to sternum. Postural reactions: Proprioceptive positioning and hopping were absent in all limbs. Spinal reflexes: Normal patellar reflexes. Moderately reduced withdrawal in all limbs. Sensory/nociception: No hyperesthesia elicited with palpation along the vertebral column. Neurolocalization: C1-C5 Assessment: -Disc extrusion (compressive vs non-compressive) -FCE -Neoplasia

**SPECIES**

Canine

**BREED**

Terrier X

**SEX**

MN

**AGE**

10 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
 Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Animal Health Partners

**REFERRING VET**

Dr. Marchal

**MAGNETIC RESONANCE IMAGING OF THE CERVICAL SPINE**

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

**MAGNETIC RESONANCE IMAGING FINDINGS**

Level with the intervertebral discs C4/C5 and C5/C6 mild hyperintense disc material is protruding into the vertebral canal, occupying approximately up to 25% of the cross-sectional area of the vertebral canal at the same level, C5/C6 > C4/C5. The hyperintense material C4/C5 presents a 'seagull-sign'. The spinal cord level with C4/C5 and C5/C6 is displaced dorsally and distorted. The volume of the nucleus pulposus of the intervertebral discs C4/C5 and C5/C6 is mild to moderately decreased. Post contrast administration no pathological distribution of the contrast media is appreciated.

The intervertebral disc C6/C7 presents a complete loss of the in fluid sensitive sequences hyperintense signal of the nucleus pulposus.

The epaxial musculature along the skull bilaterally, level C1-C4 presents a diffuse hyperintense signal in the fluid sensitive sequences with moderate diffuse contrast enhancement pattern.

A moderate supracollicular fluid accumulation is seen in the pictured parts of the skull.

**MAGNETIC RESONANCE IMAGING DIAGNOSIS**

- Hydrated nucleus pulposus extrusion C4/C5 and C5/C6 with compressive myelopathy
- Degenerative disc disease C6/C7
- Myositis cranial dorsal muscles of the neck
- Incidental supracollicular fluid accumulation

**INVOICE**

48103

**DATE**

10-30-21



**PATIENT**

Riley Chyczij

**SPECIES**

Canine

**BREED**

Terrier X

**SEX**

MN

**AGE**

10 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Animal Health  
Partners

**REFERRING VET**

Dr. Marchal

**INVOICE**

48103

**DATE**

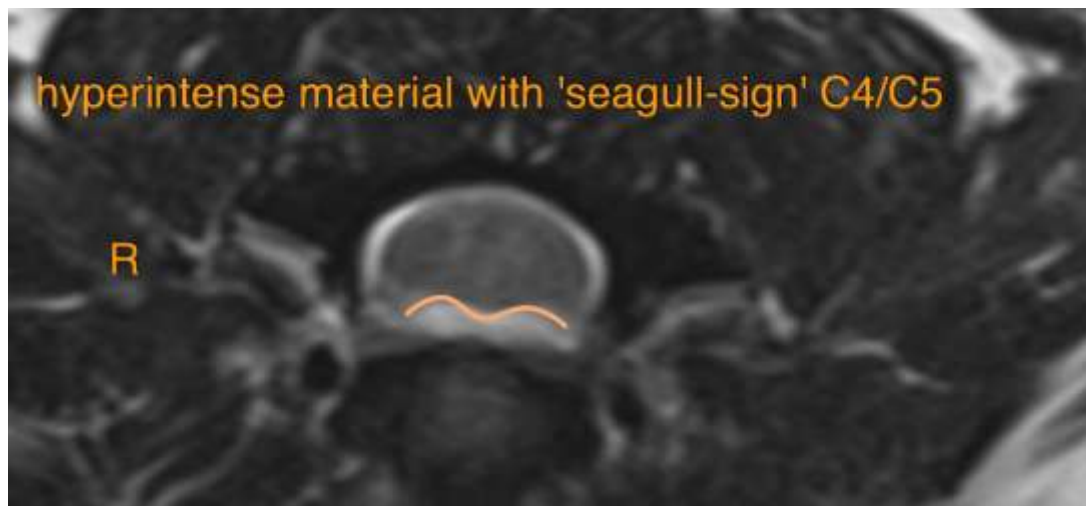
10-30-21

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The findings are compatible with hydrate nucleus pulposus extrusion in two localization, C4/C5 and C5/C6 with myelocompression being most pronounced level C5/C6. The chances of conservative management versus surgical decompression should be discussed with neurologist – in literature no significant difference was found in short- and long term outcome between surgical & conservative management.\* If surgery is performed, decompression level C5/C6 is recommended.

\* Nessler, J., Flieshardt, C., Tünsmeier, J., Dening, R., & Tipold, A. (2018). Comparison of surgical and conservative treatment of hydrated nucleus pulposus extrusion in dogs. Journal of veterinary internal medicine, 32(6), 1989-1995.

<https://onlinelibrary.wiley.com/doi/full/10.1111/jvim.15304>





**PATIENT**

Riley Chyczij

**SPECIES**

Canine

**BREED**

Terrier X

**SEX**

MN

**AGE**

10 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Animal Health  
Partners

**REFERRING VET**

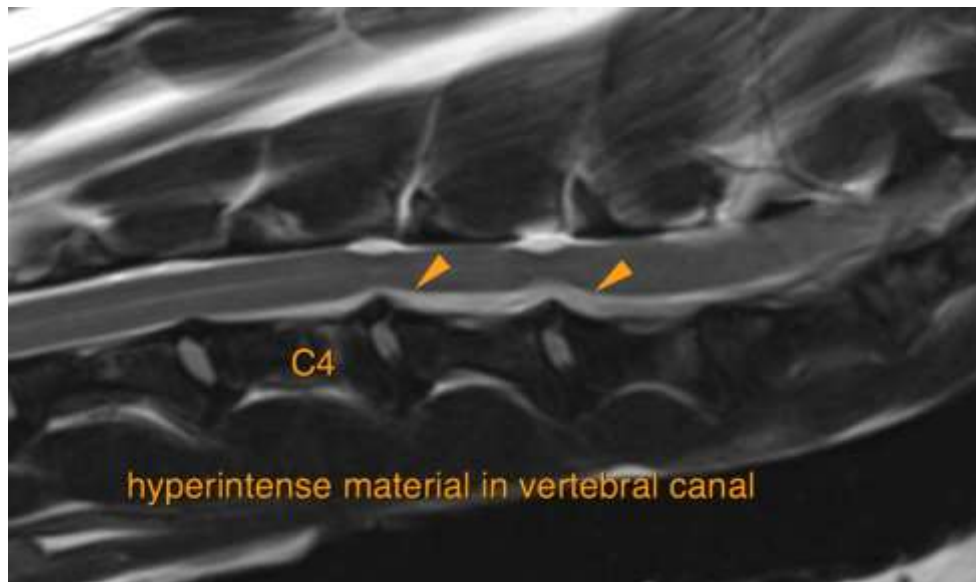
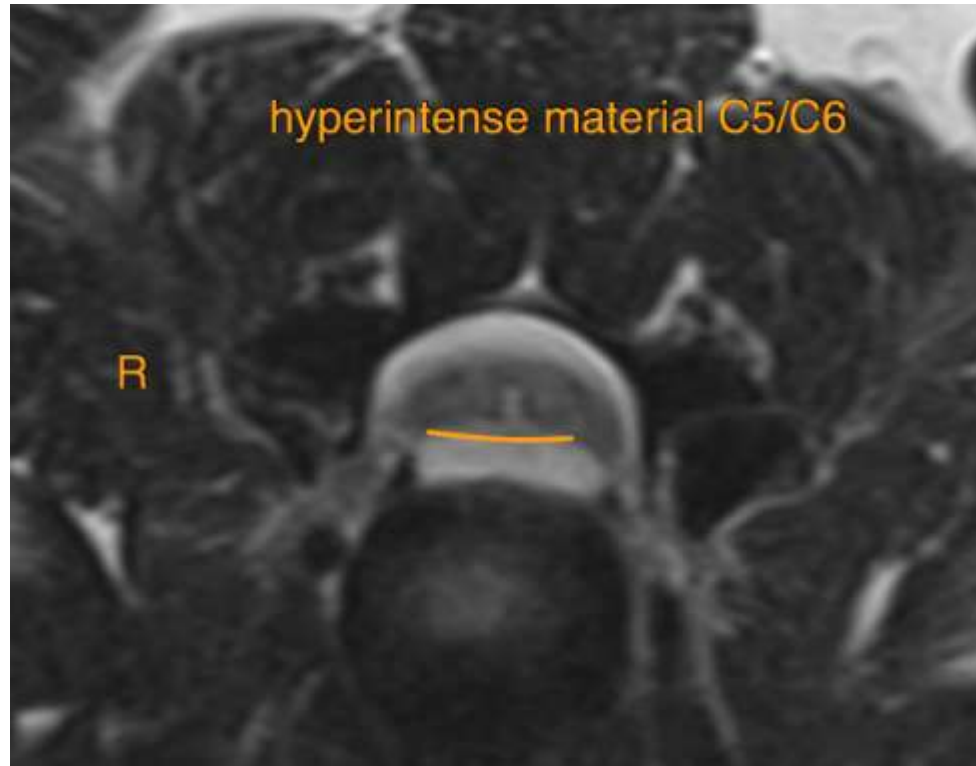
Dr. Marchal

**INVOICE**

48103

**DATE**

10-30-21





**PATIENT**

Riley Chyczij

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.

**SPECIES**

Canine

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

**BREED**

Terrier X

**SEX**

MN

**AGE**

10 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Animal Health  
Partners

**REFERRING VET**

Dr. Marchal

**INVOICE**

48103

**DATE**

10-30-21