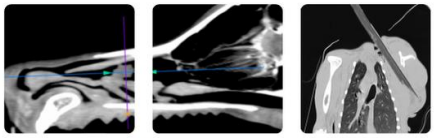

PATIENT

Minao Friund

SPECIES

Canine

BREED

Dachshund

SEX

Spayed Female

AGE

7Y

WEIGHT

23.8lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

HVSFA

HOSPITAL NAME

Hospital Veterinario San Francisco de Asis

REFERRING VET

Meaux

INVOICE

72561

DATE

11-6-25

PRESENTING CLINICAL SIGNS

Presented today for episode of hindlimb weakness/ataxia. Owner reports a hunched back. Abnormal PE/Chem/CBC/UA Results: PE: no evidence of proprioception deficits x 4. Does not seem to be in pain. Abdominal radiographs: splenomegaly

COMPUTED TOMOGRAPHY OF THE THORACIC & LUMBAR SPINE AND ABDOMEN

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

COMPUTED TOMOGRAPHIC FINDINGS

Spine

The osseous and soft tissue structures of the thoracic and lumbar spine reveal no abnormalities.

Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration, a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

The liver presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The spleen is prominent; the splenic parenchyma is uniform soft tissue attenuating and contrast enhancing.

The pancreas is evenly contoured; the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Mild splenomegaly
- Normal thoracic and lumbar spine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Potential causes for splenomegaly include extramedullary hematopoiesis, lymphoid or myeloid hyperplasia, infectious diseases, neoplasia (especially lymphoma). The splenomegaly might be accentuated by general anesthesia and the age of the patient.

The CT study reveals no abnormalities, that do explain the described intermittent hind limb weakness – in case of strong suspicion for underlying myelopathy workup can be complemented by a myelographic CT study or MRI study of the spine.

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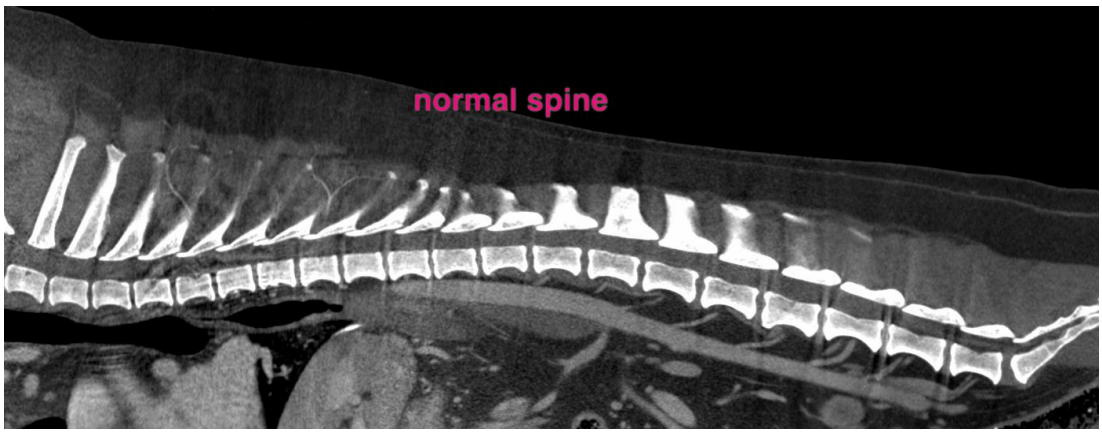

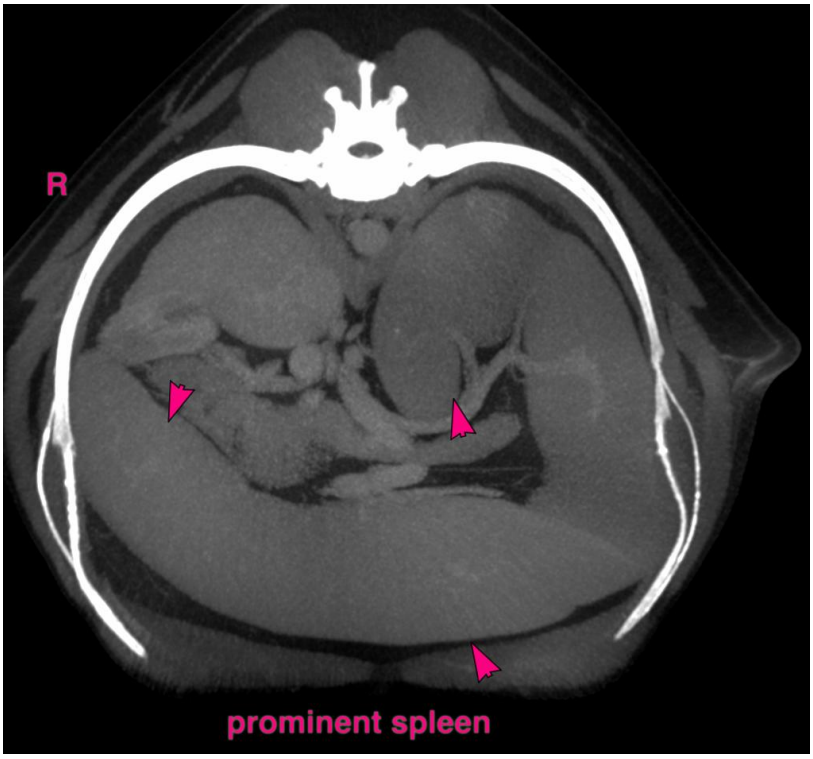

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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