



**PATIENT PRESENTING CLINICAL SIGNS**

**Loki Garcia** History: 3yr 6m old NM dachshund mix presented today for discomfort. Since Thursday P has not had bowel movement in about 3-4 days. O says P looks as if he wants to defecate but seems painful when trying. In exam room, P sits on his lower back with feet sticking out forward. Had not moved around much. Shivering excessively, O feels he is in a lot of pain. C/S/V/D: None E/D/U/D:

**SPECIES** Canine  
**BREED** Dachshund Mix  
 Diet: Earthborne +/- wet food FAS Score: Current Medications (dose and frequency): Diazepam 2mg (1/2t PO TID // last given this morning), Gabapentin 50mg/mL susp. (0.3mL PO TID PRN x pain // last given this morning) Heartworm Prevention / Flea Prevention: Known Allergies and Medical Conditions: IVDD (current), renal failure (suspected toxin), bilateral progressive thyroid tumors, chronic diffuse non-inflammatory alopecia, T12-13 pain (associated with IVDD), chronic murmur (since 16 weeks of age // as of 04/2022 - grade 2/6)

**SEX** NM  
**AGE** 3 Years, 6 Months  
 Abnormal PE/Chem/CBC/UA Results: Hydration: N Mentation: N EENT: N Oral Cavity: N Lymph Nodes: N Skin: N CV/Respiratory: N Abd/GI: Urinary bladder large - expressible Uro/Perineum: N Musculoskeletal: Painful T13-L2 Neurological: No motor, positive deep pain rear legs Fecal: Diagnostic Testing Needed: CBC/Chem/Lytes: Creat WNL, X-rays - not constipated Declined Diagnostics/Treatments: Findings: Assessment: Hindlimb paraplegia with deep pain still present Treatment Plan: Surgery at SEVN vs Medical treatment. Per Mrs SEVN said not a good surgical candidate given CRF though renal values greatly improved so may want to reconsider if not improving with medical treatment. Laser lumbar spine Pred...discussed potential risks to worsening of CRF Continue with strict rest, gabapentin, and diazepam. Consider taking to Healing Paws for acupuncture Treatment Declined:

**RADIOGRAPHIC STUDY OF THE ABDOMEN**

Radiographs of the abdomen in two orthogonal imaging planes are provided for review.

**RADIOGRAPHIC FINDINGS**

The intervertebral disc spaces along the lumbar spine appear narrowed in the lateral projection. The neuroforamen L2/L3 presents an increased radiopacity.

No abnormalities of the extraabdominal soft tissues are noted. The abdominal wall is smooth and thin.

The serosal detail is maintained throughout the peritoneal and retroperitoneal space.

The liver is appropriate in position, size and presents uniform opacity.

The splenic head is in the anticipated position and within normal limits for size and opacity. The splenic body and tail are considered normal for position, size, shape and opacity.

Both kidneys are seen and present with normal size, shape, delineation and opacity. The urinary bladder is significantly distended, it is in the anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract.

The stomach is in its anticipated position and presents normal content.

The small intestinal loops are of even diameter and non-dilated, a small amount of gas is seen within the small intestinal loops and considered within normal limits.

The colon is seen in the expected position and presents with appropriate content.

Sebastian Schaub, DVM  
 Dr. med. vet. DipECVDI

**INTERPRETED BY**

**HOSPITAL NAME**

DPC Veterinary Hospital

**REFERRING VET**

Dr. Feldt

**INVOICE**

55031

**DATE**

11-7-22



**PATIENT**

Loki Garcia

**RADIOGRAPHIC DIAGNOSIS**

- Narrowed intervertebral disc spaces along the lumbar spine
- Increased radiopacity neuroforamen L2/L3
- Distended urinary bladder – sequela to the described paraplegia

**SPECIES**

Canine

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The narrowed intervertebral disc spaces of the lumbar spine can be artefactual due to lateral sacking of the lumbar spine and oblique projection of the intervertebral disc spaces; a differential is discopathy. The increased radiopacity of the neuroforamen L2/L3 can be caused by mild mineralized disc material within the vertebral canal or superimposed normal anatomy. Cross-sectional imaging can be used as advanced diagnostic imaging modality for evaluation of the spine.

**BREED**

Dachshund Mix

**SEX**

NM

**AGE**

3 Years, 6 Months

**INTERPRETED BY**

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Dr. Feldt

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.

**INVOICE**

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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.

**DATE**

11-7-22

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
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