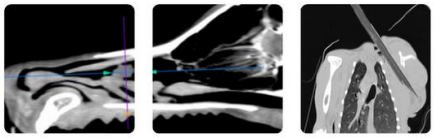

PATIENT

Ulises Menendez

SPECIES

Canine

BREED

Dachshund

SEX

NM

AGE

5Y

WEIGHT

11.8lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

José L. Alvarado Bruno (CVT) - CT Scan Technician

HOSPITAL NAME

Veterinary Image Center

REFERRING VET

Dr. A. Bauzá, DVM

INVOICE

73128

DATE

12-29-25

PRESENTING CLINICAL SIGNS

Patient presented to the ER on 12/26/2025 with hind limb ataxia and back pain. The patient is not urinating or defecating voluntarily, and anal tone is absent. A urinary catheter was placed for continuous bladder drainage. Meds: -Trazodone 50mg: ½ tab PO BID -Gabapentin 100mg: 1 cap PO BID -Prednisone 2.5mg: ½ tab PO BID x7d, ½ tab SID x7d and ½ tab EOD x7d -Prazosin 2mg: 1 cap PO BID x14d
Abnormal PE/Chem/CBC/UA Results: CBC --- HCT mild increased (61.9%) CHEM --- ALB moderate increased (4.3)

COMPUTED TOMOGRAPHY OF THE CERVICAL, THORACIC AND LUMBAR SPINE

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

COMPUTED TOMOGRAPHIC FINDINGS

THE LAST RIB BEARING VERTEBRA IS COUNTED AS T13.

Multiple intervertebral discs along the cervical, thoracic and lumbar spine present mild central mineralization.

The osseous and soft tissue structures of the cervical spine reveal no additional abnormalities.

Level with the intervertebral disc space T11/T12, mineralized material is protruding into the vertebral canal, occupying approximately ≤10% of the cross-sectional area of the vertebral canal at the same level.

The intervertebral disc space T12/T13 is mildly narrowed. Level with the intervertebral disc space T12/T13, irregular hyperattenuating material is visible in the ventral aspect of the vertebral canal at the same level, occupying approximately up to 15% of the cross-sectional area of the vertebral canal at the same level.

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

A separate right & left caudal vena cava of the pre-renal segment is seen.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Intervertebral disc herniation T11/T12 and T12/T13 with possible dynamic myelocompression
- Multifocal chondroid disc degeneration along the cervical, thoracic and lumbar spine
- Double caudal vena cava, pre-renal segment

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals mild disc herniation level T11/T12 and T12/T13 but the degree of possible myelocompression is only small – the changes may be a source for intermittent pain but are unlikely to be associated with neurological deficits. No additional abnormalities are seen that do explain the described neurological deficits. If there is suspicion for extradural isoattenuating material or intradural pathology, workup can be complemented by a myelographic CT study of MRI study of the spine.

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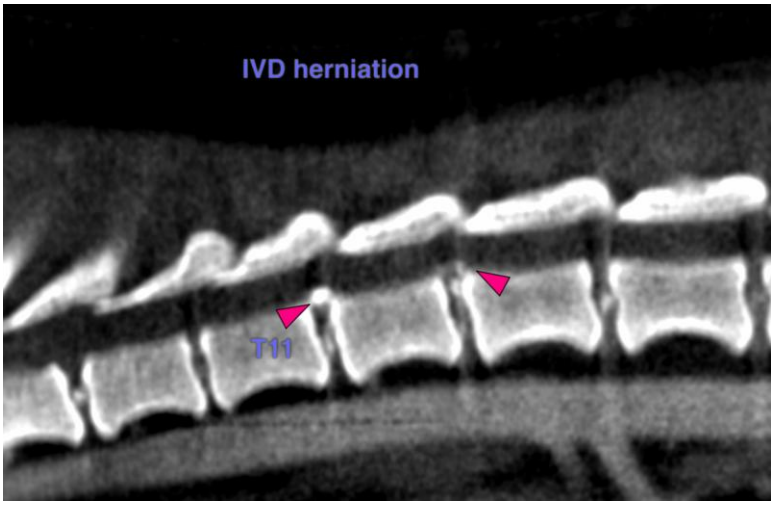

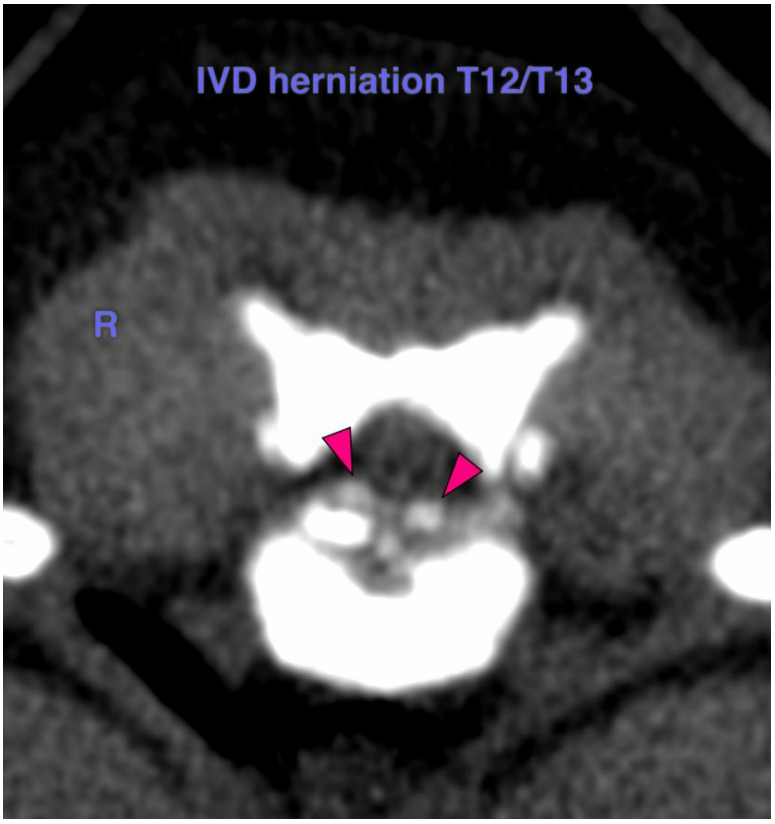

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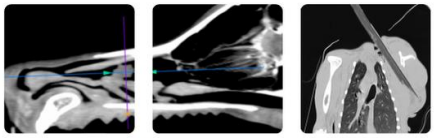

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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