

PATIENT

Ollie Feuer

SPECIES

Canine

BREED

Shih Tzu

SEX

Neutered Male

AGE

6 Years 7 Months

WEIGHT

6.4 kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

dg

HOSPITAL NAME

ASC Oceanside

REFERRING VET

Dr. Infernuso

INVOICE

35177

DATE

12/31/25

PRESENTING CLINICAL SIGNS

History: Ataxic in the hind limbs, CP deficits in the hind limbs, normal cranial nerves, normal thoracic, painful thoracolumbar region.

COMPUTED TOMOGRAPHIC STUDY OF THE THORACIC AND LUMBAR SPINE

A high resolution plain and myelographic CT study of the thoracic and lumbar spine is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

T13 presents an elongated transverse process at the left aspect, and a rib fused to the right aspect of T13. A floating rib is seen at the left aspect of T13

Level with the intervertebral disc space T12/T13, mild mineralized disc material is protruding into the vertebral canal. Post intrathecal contrast administration, in the ventral aspect of the vertebral canal level T12/T13, isoattenuating material is seen in the ventral aspect of the vertebral canal, occupying approximately 30-40% of the cross-sectional area of the vertebral canal at the same level; the spinal cord is deviated dorsally and compressed.

The intervertebral discs along the thoracic and lumbar spine present generalized variable degree of central mineralization.

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Intervertebral disc herniation T12/T13 with compressive myelopathy
- Generalized chondroid disc degeneration along the thoracic and lumbar spine
- Thoracolumbar transitional vertebra T13

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The intervertebral disc herniation T12/T13 presents relevant myelocompression and can be a potential cause for the presenting clinical signs. I consider the disc herniation T12/T13 to be chronic and an acute exacerbation of a chronic condition may have contributed to a recent development of clinical signs.



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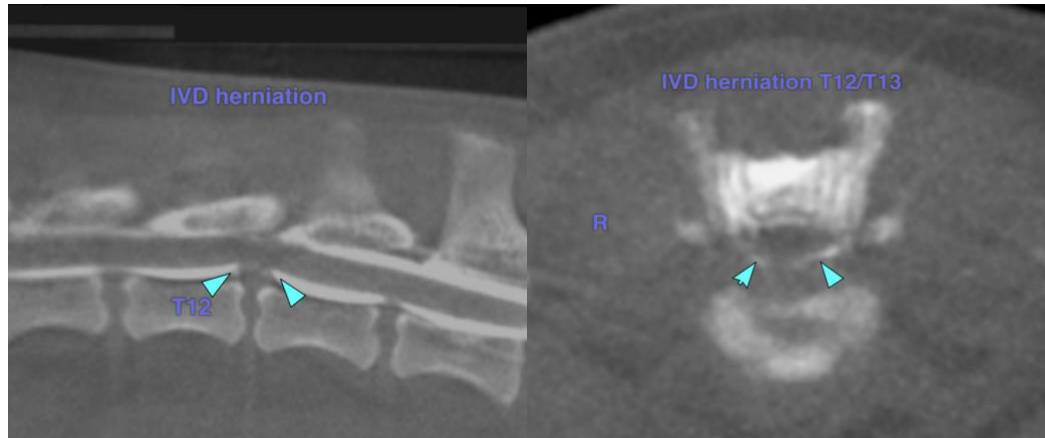
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, DVM, Dr. med. vet. DipECVDI
info@sonopath.com