



## PATIENT

Mia Diaz

## SPECIES

Canine

## BREED

Pomeranian

## SEX

Female

## AGE

9Y

## WEIGHT

12.8lbs

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet.  
DipECVDI

## IMAGING PERFORMED BY

Jose Lopez

## HOSPITAL NAME

Westchester Animal  
Hospital

## REFERRING VET

Randy Dominguez

## INVOICE

72863

## DATE

12-4-25

## PRESENTING CLINICAL SIGNS

Presented with an ambulatory paraplegia. Dog started "limping" by Owner 2-3 days ago and today started with the symptoms. Mild head tilt to the right yesterday, today has resolved.  
Abnormal PE/Chem/CBC/UA Results: Elevated ALT 272

## COMPUTED TOMOGRAPHY OF THE CERVICAL, THORACIC AND LUMBAR SPINE

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

## COMPUTED TOMOGRAPHIC FINDINGS

The intervertebral disc spaces C5/C6 and C6/C7 are collapsed – a vacuum phenomenon is seen in the remaining intervertebral disc spaces. The vertebral endplates C5/C6 and C6/C7 are irregular, present moderate sclerosis and ventral spondylosis formation. Level with the intervertebral disc spaces C5/C6 and C6/C7, mild hyperattenuating material is protruding into the vertebral canal, 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 cervical spine are within normal limits.

The osseous and soft tissue structures of the thoracic and lumbar spine are within normal limits.

S1 is not fused with S2.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Chronic discopathy C5/C6 and C6/C7 with secondary chronic osseous remodeling of the vertebral endplates and likely dynamic myelocompression
- Symmetric lumbosacral transitional vertebra
- Normal thoracic and lumbar spine

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The chronic discopathy C5/C6 and C6/C7 is considered as an incidental finding and is likely not related with the presenting clinical signs. No abnormalities can be specified, that do explain the paraplegia – there is no evidence of compressive myelopathy. Workup can be complemented by a myelographic CT study or MRI study to screen for herniation of isoattenuating material or intradural lesions.



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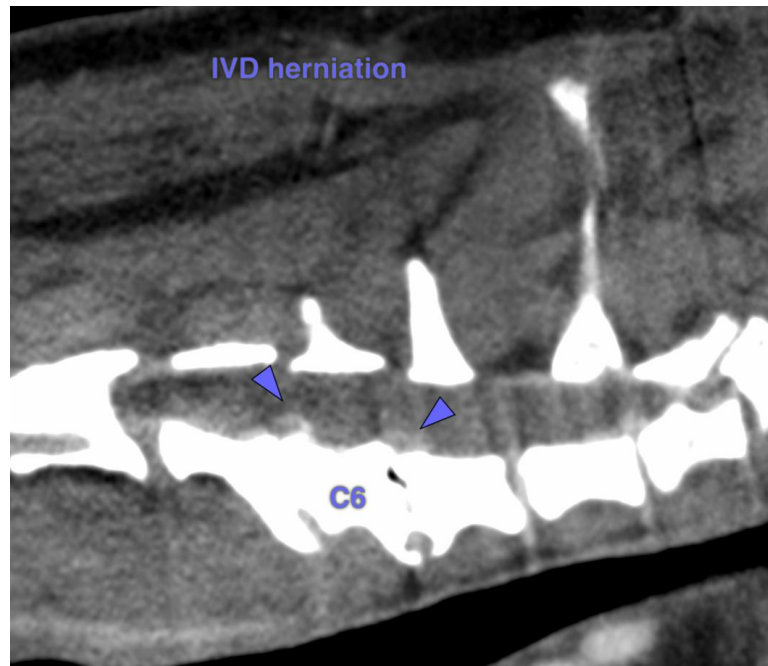
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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](mailto:info@sonopath.com)