



PATIENT

Lacy Gagnon

SPECIES

Canine

BREED

Miniature Dachshund

SEX

FS

AGE

4Y

WEIGHT

4.5kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Janice

HOSPITAL NAME

Bridgewater Veterinary
Hospital and Wellness
Centre

REFERRING VET

Dr. Shannon Stuart

INVOICE

72889

DATE

12-8-25

PRESENTING CLINICAL SIGNS

Presented for vocalizing when being picked up and less mobility. Lacy had surgery in Minneapolis in June 2025 for a C3-C4 lesion. She has since recovered well, but the owners are concerned about further back problems. At presentation, she had full neck movement with no pain, but she was uncomfortable to have her T-L area palpated. There was warmth along the paravertebral muscles in that area. Her proprioception was intact and she had an even gait. While she did not cry when being picked up by me, I was holding her in a flat back position, which may have varied from her humans. Started Meloxicam, Gabapentin, Trazadone. Methocarbamol was added in, the gabapentin was stepped down gradually, and the trazadone was stopped. On a follow up call, the owners noted that she was still sore to be picked up and they were concerned about the lack of improvement. She still continued to move well, but she was not using the ramps. Restarted Gabapentin. Persistent separation anxiety and a recent history of biting people. Lacy was started on Fluoxetine. She has thoracolumbar junction discomfort. Owners are concerned about cervical problem recurrence.
Abnormal PE/Chem/CBC/UA Results: Decreased alpk >10 U/L

COMPUTED TOMOGRAPHY OF THE CERVICAL & THORACIC SPINE

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

COMPUTED TOMOGRAPHIC FINDINGS

THE LAST RIB BEARING VERTEBRA IS COUNTED AS T13.

Level with the intervertebral disc space C2/C3, mild mineralized disc material is protruding into the vertebral canal, occupying approximately $\leq 10\%$ of the cross-sectional area of the vertebral canal at the same level.

The intervertebral disc space C3/C4 is collapsed, and the respective vertebral endplates are irregular.

The intervertebral discs along the cervical spine present moderate central mineralization – but level C3/C4.

Level with the intervertebral disc space T11/T12, in the mid ventral aspect of the vertebral canal, mineral attenuating material is seen occupying approximately up to 40% of the cross-sectional area of the vertebral canal at the same level. The mineral attenuating material level T11/T12 is extending cranially and caudally up to the mid third of the vertebral body T11 and T12. The dural tube level T11/T12 is deviated dorsally and distorted.

The intervertebral discs along the thoracic spine present mild central mineralization.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Intervertebral disc extrusion T11/T12 with compressive myelopathy
- History of ventral slot C3/C4
- Intervertebral disc herniation C2/C3 without compressive myelopathy
- Generalized chondroid disc degeneration along the cervical and thoracic spine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The mid ventral disc extrusion T11/T12 is likely cause for pain and a potential explanation for the presenting clinical signs – surgical decompression appears beneficial, either a left or right lateral approach can be used as there is no side predilection.



PATIENT

Lacy Gagnon

SPECIES

Canine

BREED

Miniature Dachshund

SEX

FS

AGE

4Y

WEIGHT

4.5kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Janice

HOSPITAL NAME

Bridgwater Veterinary
Hospital and Wellness
Centre

REFERRING VET

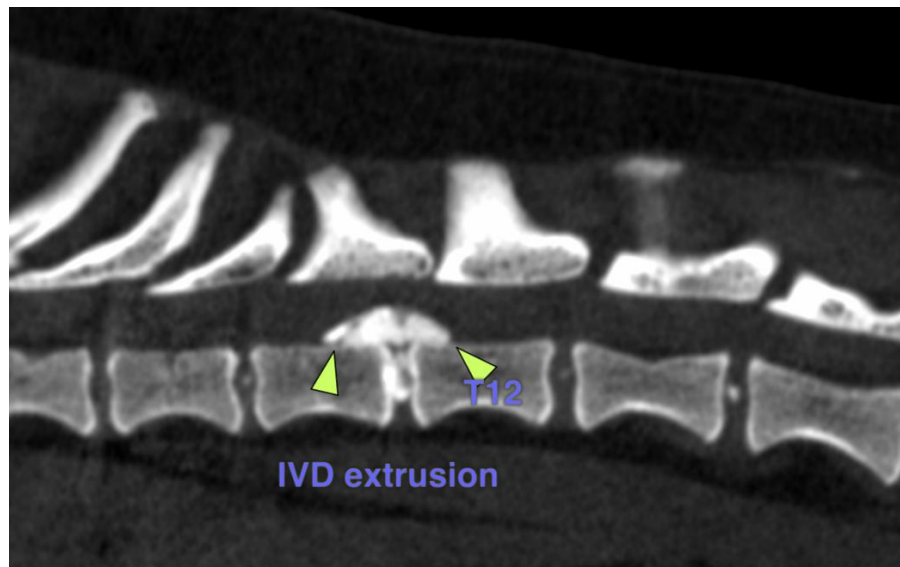
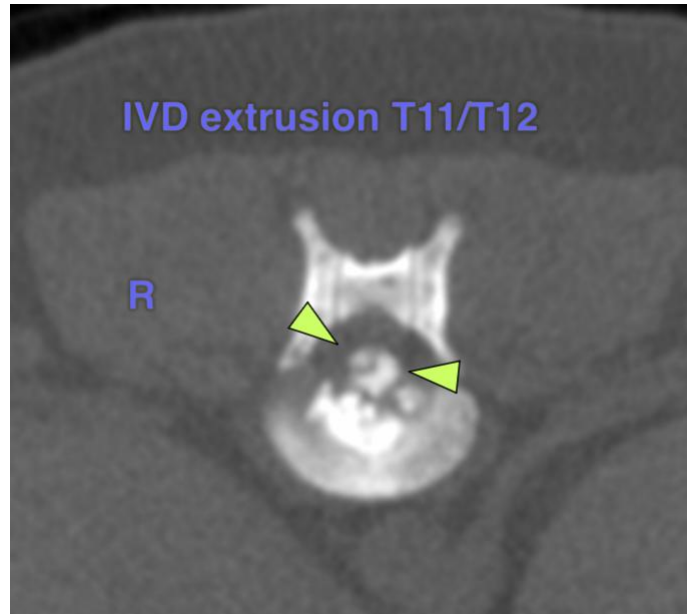
Dr. Shannon Steuart

INVOICE

72889

DATE

12-8-25



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