



## PATIENT

Bucle Vega Perez

## SPECIES

Canine

## BREED

French Bulldog

## SEX

Neutered Male

## AGE

5 Years

## WEIGHT

24 Pounds

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

## IMAGING PERFORMED BY

Jose Alvarado-Bruno,  
CVT

## HOSPITAL NAME

Veterinary Image  
Center

## REFERRING VET

Dr. M. Davila, DVM

## INVOICE

36037

## DATE

3/1/26

## PRESENTING CLINICAL SIGNS

History: Patient was taken on 2/25/2026 to emergency clinic for sudden paraparesis. On 2/26/2026 getting worse. Deep pain present but decrease. Patient is on pain. Hematuria is present.

Abnormal PE/Chem/CBC/UA Results: CBC --- RBC increased (9.04), HGB increased (21.5) and EOS decreased (0.01) CHEM --- GGT increased (19) and AMYL decreased (435)

## COMPUTED TOMOGRAPHIC STUDY OF THE THORACIC AND LUMBAR SPINE

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

## COMPUTED TOMOGRAPHIC FINDINGS

THE LAST RIB BEARING VERTEBRA IS COUNTED AS T13.

T4 to T12 present variable degree of malformation with secondary kyphotic kinking of the thoracic spine and multifocal mild spondylosis formation.

Level with the intervertebral disc space T13/L1 in the left lateral aspect of the vertebral canal, mild hyperattenuating material is appreciated, occupying approximately up to 40% of the cross-sectional area of the vertebral canal at the same level. The mild hyperattenuating material is extending cranially up to the level of the mid third of the vertebral body T13 and caudally up to the level of the cranial vertebral endplate L1. The dural tube level T13/L1 is deviated to the right and dorsally and distorted.

The lumbosacral intervertebral disc is protruding into the vertebral canal, occupying approximately up to 40% of the cross-sectional area of the vertebral canal at the same level.

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

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Left sided intervertebral disc extrusion T13/L1 with compressive myelopathy
- Intervertebral disc protrusion L7/S1 with possible dynamic compression of the cauda equina fibers
- Multifocal chondroid disc degeneration along the thoracic and lumbar spine
- Congenital malformation T4 to T12
- Spondylosis deformans

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The intervertebral disc extrusion T13/L1 is a plausible explanation for the presenting clinical signs and surgical decompression is beneficial.



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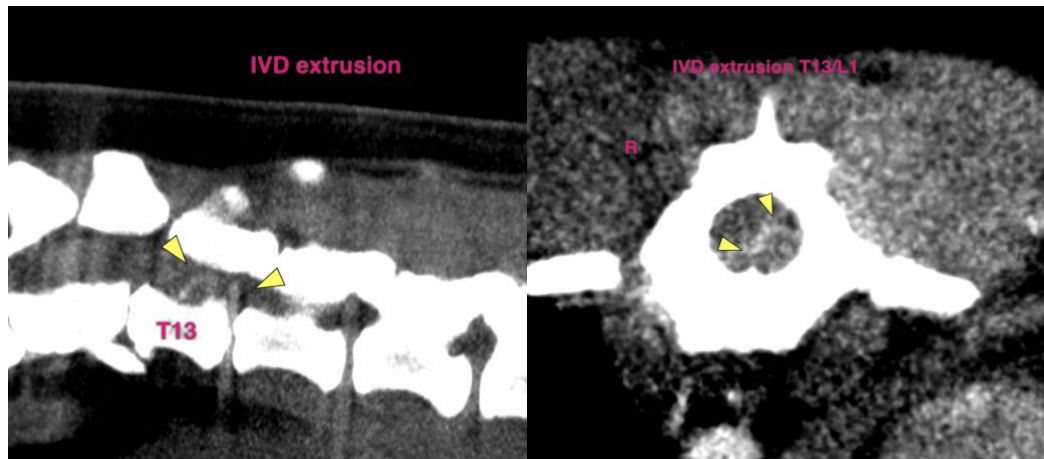
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**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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](mailto:info@sonopath.com)