



PATIENT

Phoenix Ramirez

SPECIES

Canine

BREED

Yorkshire Terrier

SEX

NM

AGE

6Y

WEIGHT

14.2lbs

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. M. Davila, DVM

INVOICE

74124

DATE

3-10-26

PRESENTING CLINICAL SIGNS

- Patient presented history of weakness bilateral hindlimbs since one week ago. Went to Banfield Hospital and started on NSAID's; owner states patient is worse than previously. History of lesion on January; responded well to treatment and physical therapy.
- Medication(s): Prednisone, Gabapentin, Methocarbamol and Famotidine.

Abnormal PE/Chem/CBC/UA Results: CBC --- RBC mild to moderate increased (9.17) CHEM --- unremarkable

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.

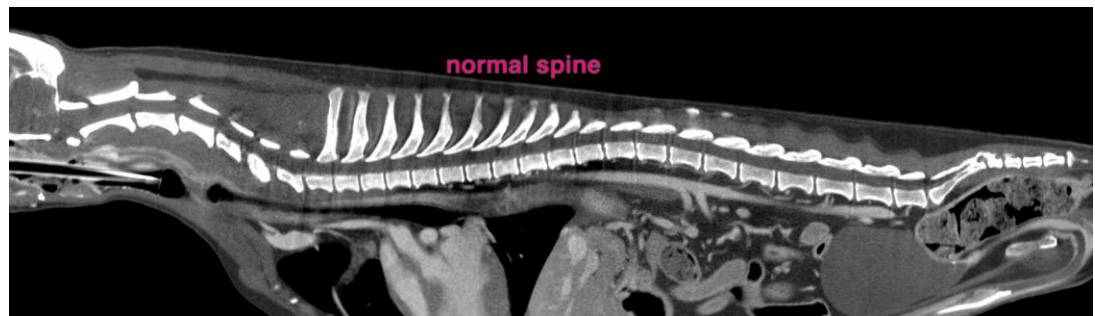
The osseous and soft tissue structures of the cervical, thoracic and lumbar spine reveal no abnormalities – but multifocal mild spondylosis formation along the thoracic spine. The dural tube has the expected diameter throughout without pathological contrast uptake.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Normal cervical, thoracic and lumbar spine – but very mild spondylosis formation along thoracic spine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study of the spine reveals no abnormalities and an underlying cause for the described clinical signs cannot be specified.



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.

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