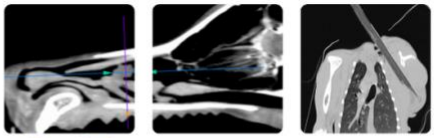



**PATIENT**

Zizou De La Cruz

**SPECIES**

Canine

**BREED**

French Bulldog

**SEX**

Spayed Female

**AGE**

3 Years 2 Months

**WEIGHT**

27 pounds

**INTERPRETED BY**

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

**IMAGING PERFORMED BY**

Monika Salgado

**HOSPITAL NAME**

Westchester Animal Hospital

**REFERRING VET**

Dr. Randy Dominguez

**INVOICE**

14501

**DATE**

03/19/26

## PRESENTING CLINICAL SIGNS

- Presented with a non-ambulatory paraplegia. Nociception diminished at the point that it's almost absent. Severe proprioception deficit bilaterally.

Abnormal PE/Chem/CBC/UA Results: Unremarkable.

## COMPUTED TOMOGRAPHIC STUDY OF THE CERVICAL, THORACIC AND LUMBAR SPINE

A high resolution pre- and post-contrast (combined iv and myelogram) CT study of the entire spine is provided for review.

## COMPUTED TOMOGRAPHIC FINDINGS

THE LAST RIB BEARING VERTEBRA IS COUNTED AS T13.

Level with the intervertebral disc spaces C2/C3 and C7/T1 disc material is protruding into the vertebral canal, occupying approximately <10% of the cross-sectional area of the vertebral canal at the same level.

At the distal aspect of the right transverse process of C7, a foreshortened rudimentary rib is seen.

The vertebral body of T3 has a wedge-shaped conformation.

Level with the intervertebral disc spaces T12/T13 and T13/L1 disc material is protruding into the vertebral canal, occupying approximately <10% of the cross-sectional area of the vertebral canal at the same level. The vertebral endplates T13/L1 present mild spondylosis formation.

The intervertebral disc space L2/L3 is moderately narrowed. Level with the intervertebral disc space L2/L3, mild to moderate hyperattenuating material is appreciated in the right ventral aspect of the vertebral canal, occupying approximately up to 20% of the cross-sectional area of the vertebral canal at the same level. The hyperattenuating material level L2/L3 is extending cranially up to the level of the cranial third of the vertebral body L2 and caudally over the cranial third of the vertebral body L3. The dural tube level L2/L3 is deviated to the left and distorted.

Multiple intervertebral discs along the entire spine present variable degree of central mineralization.

Both coxofemoral joints present moderate osteophyte new bone formation. The acetabular groove bilaterally is shallow and the center of the femoral heads is lateral to the dorsal acetabular rim.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right sided intervertebral disc extrusion L2/L3 with compressive myelopathy
- Hemivertebra T3
- Multifocal chondroid disc degeneration along the entire spine
- Spondylosis deformans T13/L1
- Rudimentary rib right transverse process C7

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The intervertebral disc extrusion L2/L3 is a plausible explanation for the presenting clinical signs – surgical decompression appears beneficial.

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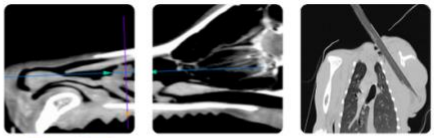

Teleradiology
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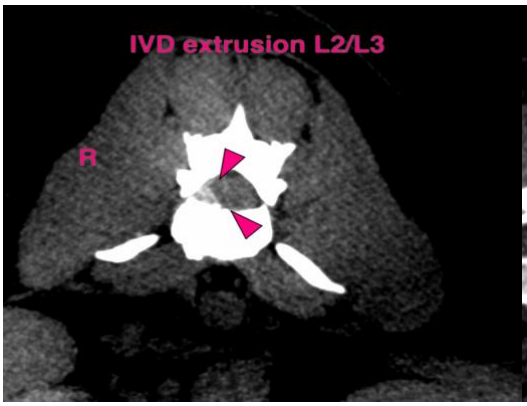


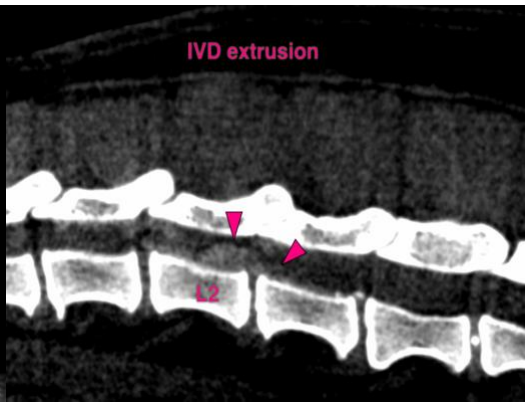


**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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