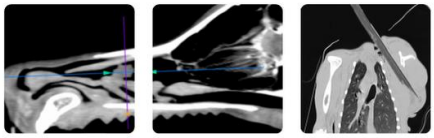


PATIENT

Coconut Barahona

SPECIES

Lagomorph

BREED

Rabbit

SEX

Male Neutered

AGE

12Y, 7M, 26D

WEIGHT

1.06kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Gina Vecere, DVM, DACEPM

HOSPITAL NAME

Catskill Veterinary Services, PLLC

REFERRING VET

Gina Vecere, DVM, DACEPM

INVOICE

74010

DATE

3-2-26

PRESENTING CLINICAL SIGNS

- Px presented on 2/12/26 for weakness of the hind legs & soft stool. Has been going on since February 5th. Today the owner reports px's stool is very soft- paste like only with pellets. When eating hay-normal stool. Owner offer pellets once a day. Finish probiotics last night-15 day dose.
- Meds: Neopolydex eye drops at night - last given last night
- Last Meal: this AM - pellets and hay
- Appetite: Good.
- Energy Levels and behavior: Normal
- No teeth grinding, drooling, vomiting or regurgitation, coughing/hooting/wheezing/sneezing/nasal discharge/open mouth breathing
- Past Medical History/ Medications: Primary Vet is Pine Bush VCA. Went to West End, Bene-bac, panacur, NeopolyDex. Cateracts, E. Cuniculi.
- Assessment: Muscle wasting over hind end with paraparesis, concern for degenerative myelopathy vs weakness secondary to arthritic changes. Cannot rule out neoplasia.
- Historic seizure-like events, previously treated for E. cuniculi by assumption (no testing performed) however full courses of panacur (28 days) not pursued.

Abnormal PE/Chem/CBC/UA Results: PE: Eyes: Abnormal: Uveitis OU; cataracts OU; Conjunctiva: Abnormal: Mild mucoid discharge OD; Ambulation: Abnormal: Stifles medially turned at rest; General Findings: Abnormal: Paraparesis in the hind limbs, unable to support weight. CPs intact CBC: WNL. Chemistry: WNL. E. cuniculi panel: negative.

COMPUTED TOMOGRAPHY OF THE SKULL, THORAX AND ABDOMEN

A high resolution pre- and post-contrast CT study of the skull, thorax and is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

In the post contrast series, no overt contrast enhancement of the vascular structures nor parenchymal organs is appreciated – extravasation of contrast into the subcutaneous tissue at the lateral aspect of the right hind limb is noted.

Skull

Image contrast of the osseous structures is limited.

The masticatory muscles present mild mineral attenuating striation.

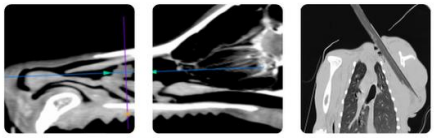
Dentition is complete and appears unremarkable in all jaw quadrants – considered as normal finding in Lagomorpha.

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals are within normal limits.

The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.



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The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

Along the cervical spine, multifocal spondylosis formation is appreciated.

Thorax

Along the region of the joint capsule of both shoulder joints, multiple granular mineralizations are appreciated.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior.

Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.

Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

The kidneys cannot be delineated against the gastrointestinal structures.

The liver presents without overt abnormalities.

The position and content of the gastrointestinal tract are considered within normal limits throughout.

In the region of the lesser curvature of the stomach, a crescent shaped mineral attenuating body is appreciated.

Along the lumbar spine, multifocal spondylosis formation is seen.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Spondylosis deformans
- Metaplasia joint capsule both shoulder joints
- Normal skull
- Normal thorax
- Normal appearing abdomen, but possible dystrophic mineralization in the cranial abdomen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals no overt abnormalities and an underlying cause for the paresis cannot be specified.

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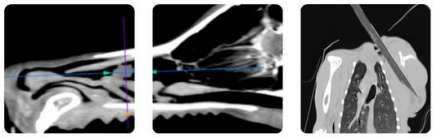

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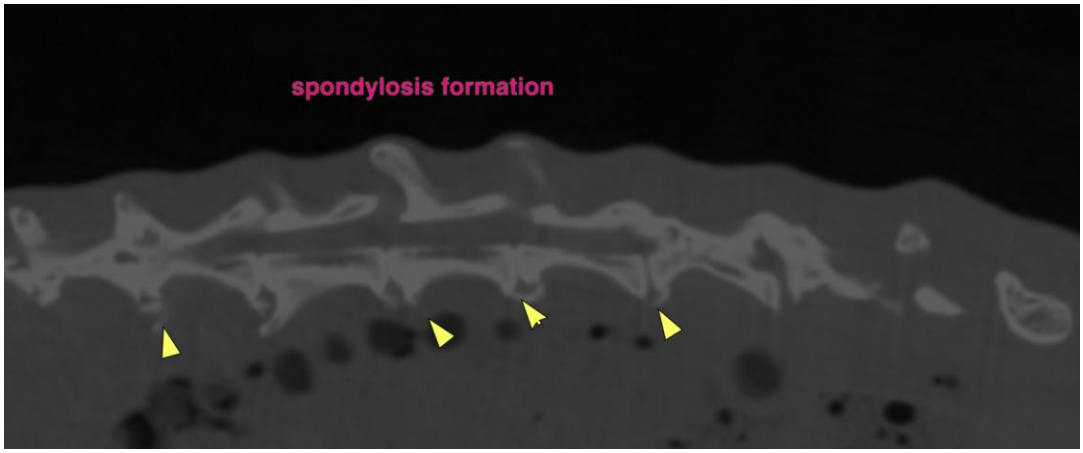

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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