



PATIENT PRESENTING CLINICAL SIGNS

Maya Torres Patient presented on 3/15/23 with the concern of being acutely lateral recumbent and not using front limbs. P is not up to date on since 2 years ago. P went home with gabapentin and prednisone. P came to a recheck walking normally and bar. Yesterday (3/29/23) patient came with same clinical signs as in 3/15/23. No proprioception on front and hindlimb on left side and slow on right side. Slow withdraw. Patient is very painful mostly on cervicals.

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE CERVICAL SPINE

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

BREED

Doberman Pinscher
Miniature

COMPUTED TOMOGRAPHIC FINDINGS

The wall of the right external ear canal is moderately thickened and the lumen is narrowed.
Level with the intervertebral disc space C2/C3, mild mineralized disc material is mildly bulging into the vertebral canal, distorting the ventral epidural space.

SEX

Spayed

Post contrast administration, mild protrusion of the intervertebral discs C3/C4 and C4/C5 into the left ventral aspect of the vertebral canal is appreciated, occupying approximately up to 5-10% of the cross-sectional area of the vertebral canal at the same level.

AGE

10 Years

The intervertebral disc space C6/C7 is collapsed and the respective vertebral endplates present moderate sclerosis of the subchondral bone and mild ventral spondylosis formation.
The soft tissue structures of the neck present no abnormalities.

INTERPRETED BY

COMPUTED TOMOGRAPHIC DIAGNOSIS

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

- Chronic discopathy C6/C7 without evidence of compressive myelopathy
- Mild intervertebral disc protrusion C2/C3 to C4/C5 with possible dynamic myelocompression
- Right sided otitis externa
- Mild spondylosis deformans C6/C7

HOSPITAL NAME

Hospital Veterinario
San Francisco de Asis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study presents no specific abnormality, explaining the tetraparesis. The appreciated mild intervertebral disc protrusions and the chronic discopathy C6/C7 for the presenting clinical signs is questionable. However, a negative CT study does not rule out intramedullary lesions, protrusion/extrusion of isoattenuating disc material, ischemic myelopathy, acute non-compressive nucleus pulposus extrusion, other. In case of strong clinical suspicion for compressive myelopathy or intramedullary lesions, recommend complementing workup by a myelographic CT study or MRI study of the cervical spine.

REFERRING VET

DRA RODRIGUEZ

INVOICE

57566

DATE

3-30-23



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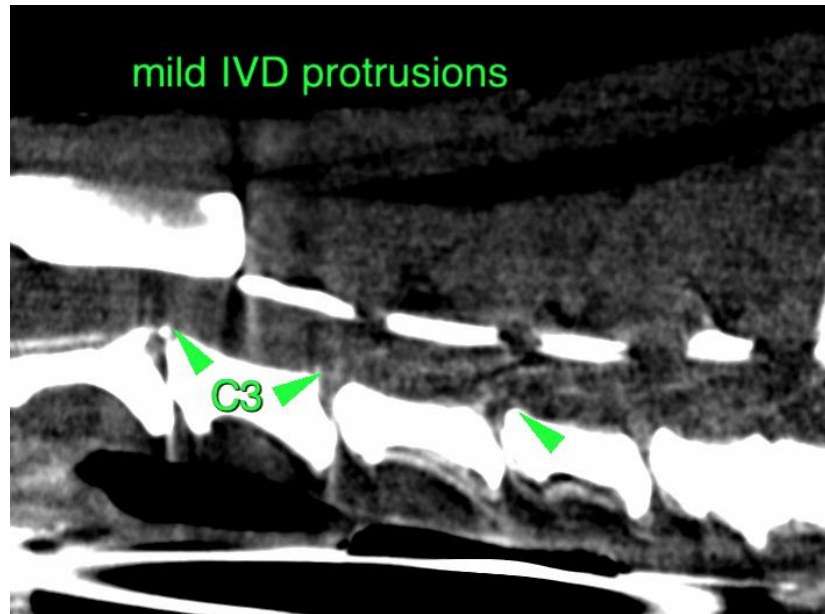
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PATIENT The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Maya Torres

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.

SPECIES

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