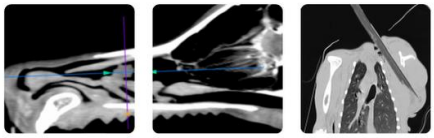



SonoPath.com info@sonopath.com 1.800.838.4268

**PATIENT**

Bartleby Meiners

**SPECIES**

Canine

**BREED**

Mixed Breed

**SEX**

Male Neutered

**AGE**

4Y

**WEIGHT**

32.4kg

**INTERPRETED BY**

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

**IMAGING PERFORMED BY**

LAN

**HOSPITAL NAME**

Southern Oregon Veterinary Specialty Center

**REFERRING VET**

Dr. Emily Riddle

**INVOICE**

74469

**DATE**

4-6-26

## PRESENTING CLINICAL SIGNS

2 day history of progressive ataxia and paraparesis that has progressed to nonambulatory paraparesis. Signs have progressed faster on the right pelvic limb. Panniculus end at T10 on the right and L2 on the left. No past significant medical history.

## COMPUTED TOMOGRAPHY OF THE THORACIC AND LUMBAR SPINE

A high resolution plain and myelographic CT study of the thoracic and lumbar spine is provided for review.

## COMPUTED TOMOGRAPHIC FINDINGS

THE LAST RIB BEARING VERTEBRA IS COUNTED AS T13.

Only the most caudal segment of the thoracic spine is included in the field of view.

In the right lateral and right laterodorsal aspect of the vertebral canal level with T12 to L1, isoattenuating material is appreciated, occupying approximately up to 40% of the cross-sectional area of the vertebral canal at the same level. The dural tube level T12 to L1 is deviated to the left and distorted.

The intervertebral discs along the caudal thoracic spine – including T13/L1 – present mild to moderate central mineralization.

The remainder of the osseous and soft tissue structures of the lumbar spine are within normal limits.

Post intrathecal contrast administration the contrast media is dissecting along the epidural space; the contrast column can be appreciated up to the level of L1/L2.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right sided extradural myelocompression T12 to L1
- Generalized chondroid disc degeneration caudal thoracic spine

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appreciated myelocompression T12 to L1 is a plausible explanation for the presenting clinical signs – both primary hemorrhage or preceding intervertebral disc extrusion are possible. Surgical decompression level T12 to L1 appears beneficial.

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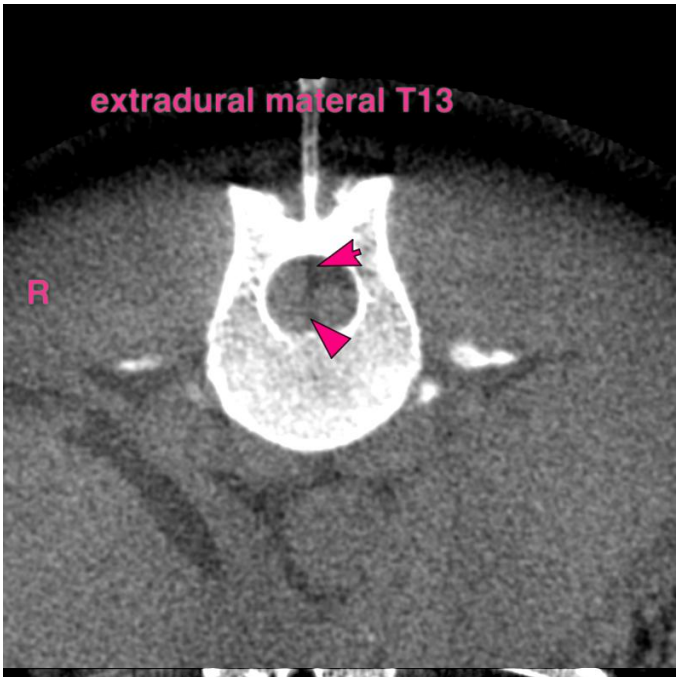


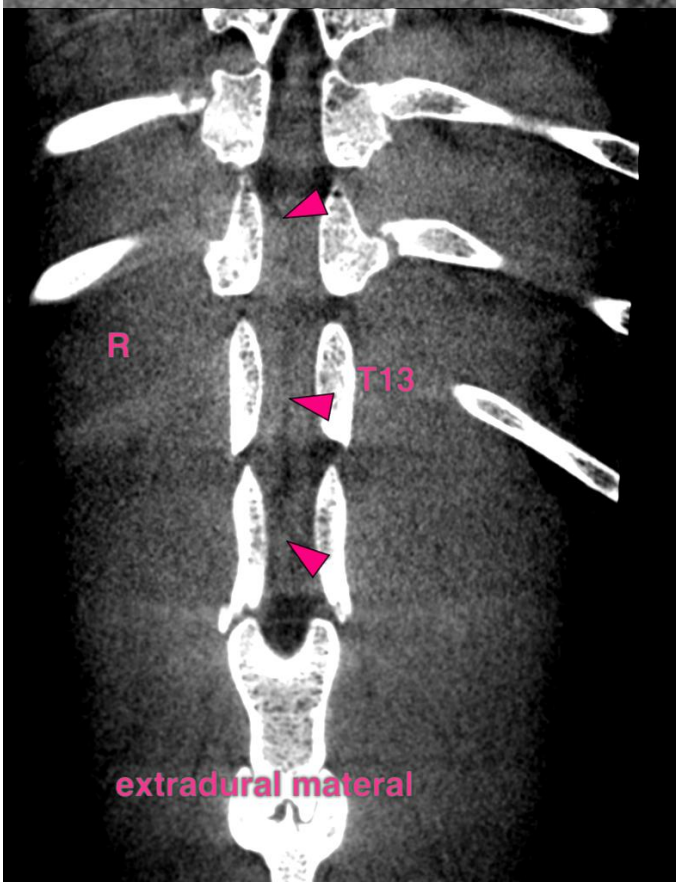

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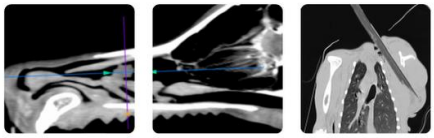

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**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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