



PATIENT PRESENTING CLINICAL SIGNS

Solo #5077UF
Nebraska Humane
Society

Solo presented to NHS in October of 2022 for a 6 month rabies quarantine observation following possible exposure to a raccoon. In April, following his observation, he was noted to have intermittent lameness/proprioceptive deficits in his front legs when walking on uneven flooring/grass (right worse than left). We took spinal radiographs and forelimb radiographs. We also noted a growth on the right front paw digit 4 that was deeply infiltrative, and there was concern that this was causing the foot misplacement. We removed this growth via amputation of the digit (mass diagnosed as benign apocrine adenoma v reactive dilatation of apocrine gland). Solo then developed an antibiotic resistant infection. We treated him for nearly 5 weeks with amikacin, until he started showing neurologic signs (paresis, ataxia, proprioceptive defects). This seemed to improve in the week following discontinuing amikacin. He is now having intermittent proprioceptive defects again.

SPECIES

Canine

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BREED

American
Staffordshire Terrier
Mix

Abnormal PE/Chem/CBC/UA Results: Mild increase in liver enzymes - no signs of renal toxicities secondary to antibiotic therapy.

COMPUTED TOMOGRAPHY OF THE CERVICAL & THORACIC SPINE

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

COMPUTED TOMOGRAPHIC FINDINGS

SEX

The thoracic spine is included within the field of view up to the level of T8.

MN

The vertebral endplates C6/C7 present mild spondylosis formation.

AGE

The remainder of the osseous and soft tissue structures of the cervical & included segment of the thoracic spine are within normal limits.

6 Years

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Spondylosis deformans C6/C7

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study presents without macromorphological abnormalities explaining the neurological deficits. In case of strong suspicion for underlying compressive myelopathy or intradural lesions, recommend complementing workup by a myelographic CT study or MRI study of the spine.

HOSPITAL NAME

Gentle Doctor Animal
Hospitals

REFERRING VET

Pete Bashara, DVM

INVOICE

58792

DATE

6-13-23



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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.

SPECIES

Canine

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com

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