



PATIENT PRESENTING CLINICAL SIGNS

PATIENT
Maizey Schmidt

SPECIES
Canine

BREED
Cavalier King Charles Spaniel

SEX
FS

AGE
5.5 Years

INTERPRETED BY
Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME
Casselton Vet Service

REFERRING VET
Brad Bartholomay

INVOICE
52541

DATE
6-21-22

Back pain with difficulty walking 1115 on/off since 2019. Acute back pain in 2019 was treated and improved, but had recent bout and O wanted to check for source of pain. On rads in 2019: narrowed disc space to lower back and lower thoracic. Also noted grade 2/6 heart murmur approx. 2 months ago. Had Echo 2 weeks ago: good contractility and synchronicity with mild LA enlargement, mild MR with moderately clubby anterior leaflet. Diagnosis: CHF Stage 1B (early) with clubby MV. Current medications: Pimobendan 1/2 5mg bid and enalapril 1/2 2.5mg SID. CBC & Chem 10 today was essentially within normal limits (Eosinophils slightly elevated). No signs at home at this time. Still has tender places on back palpation.

COMPUTED TOMOGRAPHY OF THE CERVICAL, THORACIC AND LUMBAR SPINE

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

COMPUTED TOMOGRAPHIC FINDINGS

The intervertebral disc C2/C3 is mildly protruding into the vertebral canal, mildly depressing the ventral subarachnoid space at the same level. The remainder of the osseous and soft tissue structures of the cervical spine are within normal limits.

The vertebral endplates T4/T5 present mild spondylosis formation.

Level with T10/T11, a mild amount of heterogeneous mineral attenuating material is appreciated in the ventral aspect of the vertebral canal, mildly distorting the ventral subarachnoid space at the same level. The material is extending predominantly cranially over the vertebral body of T10.

Six lumbar vertebra are present.

Level with the intervertebral disc space L5/L6, mineralized disc material is protruding mildly into the vertebral canal, distorting the ventral epidural space at the same level.

The heart presents without overt changes in the plain CT study.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Mild intervertebral disc extrusion T10/T11 with possible dynamic compressive myelopathy
- Mild intervertebral disc protrusion C2/C3 without compressive myelopathy
- Mild spondylosis formation T4/T5
- Normal heart

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The extruded disc material level T10/T11 is likely chronic and the amount of material in the vertebral canal is mild but might be a source for dynamic compression of the spinal cord and source of intermittent pain. A clinical trial pregabalin can be tried. At this point, surgical intervention is not indicated.

No overt abnormalities of the heart are appreciated, but a cardiac echo will provide best diagnostic value for assessment of cardiac chamber size and function.



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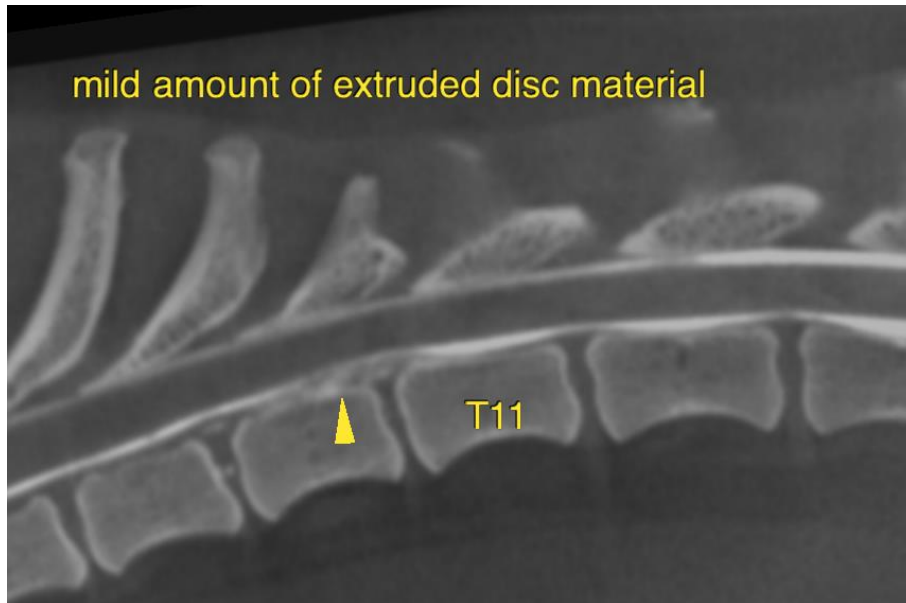
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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