



**PATIENT PRESENTING CLINICAL SIGNS**

Bacio Plastina Garage door closed on lumbar spine July 21 and was acutely ataxic following this. Seemed sore but comfort has improved. Ataxia has worsened since that time Exam: Non ambulatory paraparesis and ataxia. Mildly diminished patellar reflexes. Intact flexor reflexes. Absent proprioceptive positioning in the pelvic limbs. Non painful. Intact sensation. Localization - T3-L3

**SPECIES**

Canine **MAGNETIC RESONANCE IMAGING OF THE THORACIC & LUMBAR SPINE**

T2 & T2 (DIXON) weighted pre- and post-gadolinium sequences in multiple imaging planes are provided for review.

**BREED**

Shih Poo **MAGNETIC RESONANCE IMAGING FINDINGS**

The osseous and soft tissue structures along the thoracic spine present without abnormalities.

**SEX**

Accentuated the hypaxial musculature along the lumbar spine and the epaxial musculature level with L3&L4 presents a diffuse irregular hyperintense signal in STIR.

**MN**

In STIR & T1w sequences the subchondral bone of the cranial vertebral endplate of L3 presents a transverse hyperintense and contrast enhancing line in the ventral aspect. The cranial fourth of the vertebral body of L4 presents a transverse fracture line, filled with STIR and T1 hyperintense material. Segmental lordosis of the lumbar spine level L3/L4 is appreciated. Hypointense material is appreciated in the left ventral aspect of the vertebral canal, level L3/L4, occupying approximately 15-20% of the cross-sectional area of the vertebral canal at the same level. The spinal cord level L3/L4 is distorted. The facet joints L3/L4 are mildly widened. The retroperitoneal fat level L3/L4 presents a T2 hypointense striation.

**AGE**

16 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The vertebral body of L7 is foreshortened and the normal anatomy is lost and replaced by multiloculated, T2 and STIR heterogeneous hypo- to hyperintense mass; post contrast administration the mass originating from the vertebral body of L7 presents mild to moderate irregular contrast enhancement pattern. The mass of L7 is bulging into the vertebral canal, narrowing the vertebral canal by approximately 50-60%.

**HOSPITAL NAME**

Animal Health Partners

**MAGNETIC RESONANCE IMAGING DIAGNOSIS**

- Soft tissue mass L7 with collapse of the vertebral body of L7
- Subacute to chronic traumatic transverse fracture cranial aspect vertebral body L4
- Transverse fissure line subchondral bone vertebral body L3
- Secondary traumatic myositis and retroperitoneal hematoma level L3/L4
- Normal thoracic spine

**REFERRING VET**

Dr. Greg Kilburn

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INVOICE**

59604

The fractured vertebra L4 is a plausible explanation for the acute signs following the traumatic insult. The appreciated ataxia and diminished reflexes in the hind limbs can likely be explained by the mass originating from L7 – such as primary osseous neoplasm is considered likely – such as fibrosarcoma, hemangiosarcoma, plasma cell tumor/myeloma, osteosarcoma.

**DATE**

8-1-23



**PATIENT**

Bacio Plastina

**SPECIES**

Canine

**BREED**

Shih Poo

**SEX**

MN

**AGE**

16 Years

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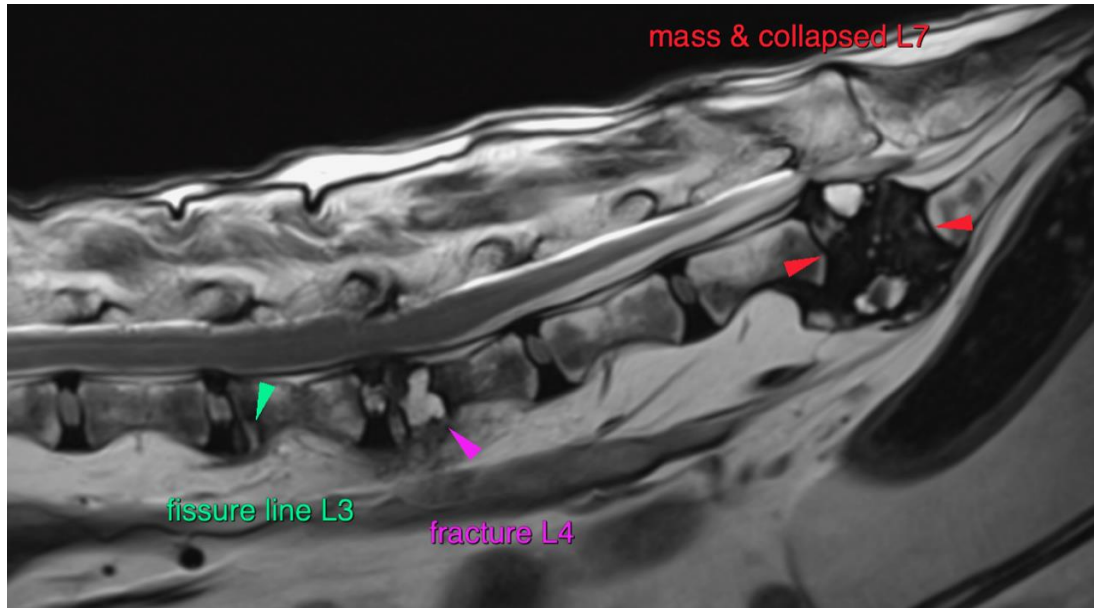
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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