



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Wilson Ng  
**SPECIES** History: Wilson is a 9y M: N Beagle mix presenting today for hind limb paralysis. Owner reports that in early July, Wilson began struggling to use the steps and his rDVM suspected a muscle strain. On August 2nd, owner noticed Wilson dragging his toes and crossing his hind legs when walking. He lost mobility in his hind limbs two days ago. Intervertebral disc disease was suspected by the specialty hospital O went to although no diagnostics were done.

Canine  
 Abnormal PE/Chem/CBC/UA Results: Bilateral hind limb paralysis, absent CP, slow withdrawls

**BREED COMPUTED TOMOGRAPHIC STUDY OF THE THORACIC & LUMBAR SPINE**

Beagle A high resolution pre- and post-contrast CT study of the thoracic & lumbar spine are provided for review.

**SEX COMPUTED TOMOGRAPHIC FINDINGS**

Neutered Male THE LAST RIB BEARING VERTEBRA IS COUNTED AS T13.

**AGE** The left lamina of C7, right lamina and pedicle of T1 present permeative osteolytic lesions.

9 Years Ventral to T4 and T5, a convex shaped soft tissue mass is bulging ventrally into the mediastinum and the respective vertebral bodies present permeative osteolytic lesions and spiculated periosteal new bone formation at the ventral aspect, extending into the soft tissue mass. After intrathecal contrast administration, level with T4/T5, soft tissue material is extending into the vertebral canal, occupying approximately 60% of the cross-sectional area of the vertebral canal at the same level – compressing the spinal cord.

**INTERPRETED BY**

Sebastian Schaub,  
 DVM Dr. med. vet.  
 DipECVDI

L5 presents advanced permeative osteolytic lesions with partial destruction and amorphous periosteal new bone formation along the right aspect.

**HOSPITAL NAME**

Animal Surgical  
 Center- Oceanside

The cranioproximal aspect of the left scapula presents focal permeative osteolytic lesions.

The pictured parts of the thorax present multiple, well-defined, variable sized soft tissue attenuating nodules.

**REFERRING VET**

Lefferts AH

The prostate is symmetrically enlarged and presents diffuse amorphous mineralization of the prostatic parenchyma.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

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- Prostatomegaly with dystrophic mineralization
- Polyostotic aggressive osteolytic lesions multifocal along the thoracic & lumbar spine and left scapula – partially with associated soft tissue component invading the vertebral canal and secondary myelocompression

**DATE**

8/11/23



**PATIENT** • Structured nodular interstitial lung pattern

Wilson Ng

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

In summary the appreciated findings are most consistent with primary prostatic carcinoma and multifocal metastatic spread to the axial & appendicular skeleton and the lung. There are no feasible treatment options and the prognosis is considered infaust.

**SPECIES**

Canine

**BREED**

Beagle

**SEX**

Neutered Male

**AGE**

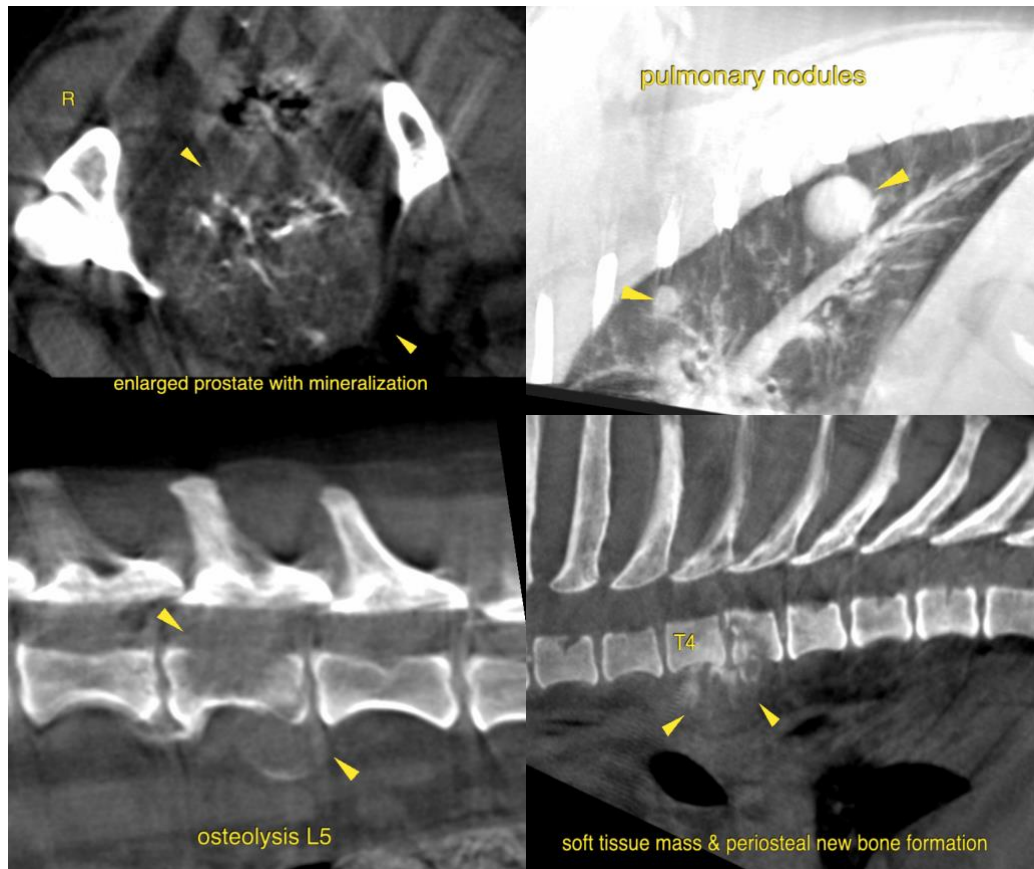
9 Years

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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.**

**REFERRING VET**

Lefferts AH

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

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**PATIENT**

Wilson Ng

**SPECIES**

Canine

**BREED**

Beagle

**SEX**

Neutered Male

**AGE**

9 Years

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