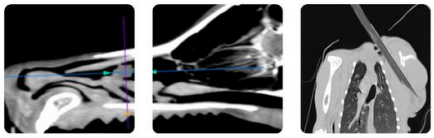

PATIENT

Jade Shamah

SPECIES

Canine

BREED

Dachshund

SEX

FS

AGE

4

WEIGHT

8.2

INTERPRETED BY

Tilde Rodrigues Froes, DMV, MSc., Dr. Med Vet., Dipl. CBraRVet

IMAGING PERFORMED BY

David

HOSPITAL NAME

Animal Surgical Center - Oceanside

REFERRING VET

Infernuso

INVOICE

74443

DATE

4-1-26

PRESENTING CLINICAL SIGNS

- cervical pain mild
- no neurologic deficits

COMPUTED TOMOGRAPHIC STUDY OF THE SPINE

A post-contrast and CT myelogram study of the entire spine was provided for review, totaling 4 series, including transverse images in both bone algorithm. One non-contrast series and tree after myelogram injections, bone algorithm.

COMPUTED TOMOGRAPHIC FINDINGS

SPINE

The vertebral bodies (C1–C7, T1–T13, L1–L7, and sacrum) are normal in number, size, shape, and attenuation. Vertebral column alignment is within normal anatomical limits.

At the level of C5–C6, there is a moderate amount of mixed hyperattenuating extradural material located in the ventral right lateral aspect of the vertebral canal, occupying approximately 30% of the canal diameter. This material extends caudally and toward the corresponding neurovascular foramen, resulting in mild spinal cord compression and probable right-sided nerve root impingement.

Multiple in situ intervertebral disc mineralizations are present throughout the spine.

No aggressive osseous lesions, lytic or proliferative bone changes, or acute traumatic abnormalities are identified.

The adjacent paraspinal soft tissues are symmetrical and within normal limits.

Myelographic Findings:

Following contrast administration at the L6–L7 level, contrast medium is visualized within the subarachnoid space and epidural spaces, with appropriate cranial flow extending to approximately T1 in the ventral contrast column and T3 in the dorsal contrast column.

There are mild, multifocal, subtle irregularities along the contrast columns, particularly the ventral contrast column, considered most likely artifactual. No evidence of complete contrast column interruption or marked deviation is identified.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- C5–C6 right ventrolateral extradural material extends caudally and toward the corresponding neurovascular foramen, resulting in mild spinal cord compression and probable right-sided nerve root impingement. Primary differential diagnosis: intervertebral disc extrusion/herniation.
- Multifocal intervertebral disc mineralization, consistent with chondroid disc degeneration.

PATIENT

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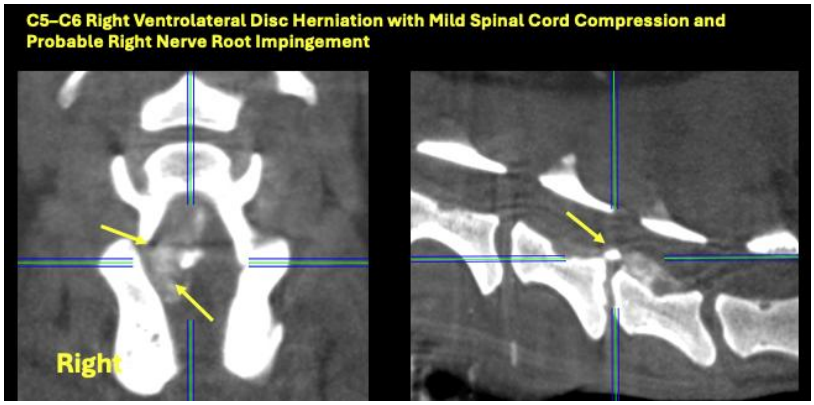
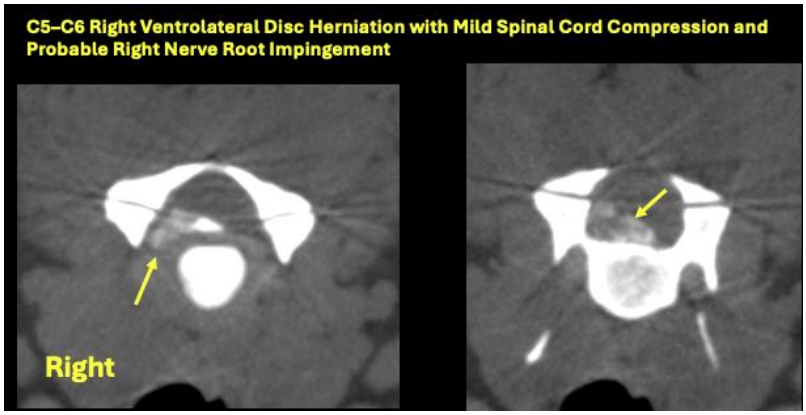
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The tomographic findings demonstrate C5–C6 right ventrolateral extradural material extends caudally and toward the corresponding neurovascular foramen, resulting in mild spinal cord compression and probable right-sided nerve root impingement. Primary differential diagnosis: intervertebral disc extrusion/herniation. Clinical and neurologic correlation is recommended.

If clinical signs progress or neurologic deficits develop, neurology consultation and/or surgical decompression may be considered.





The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

Tilde Rodrigues Froes, DMV, MSc., Dr. Med.Vet., Dipl.CBraRVet
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