



**PATIENT PRESENTING CLINICAL SIGNS**

Jagger Jagger Patient presented with rear paraplegia with decreased neurological reflexes specially in rear left limb.

**COMPUTED TOMOGRAPHIC STUDY OF THE SPINE**

**SPECIES**

K9

A post-contrast CT and CT myelography study of the thoracic, thoracolumbar, lumbar and lumbosacral spine are provided for review. One endovenous post-contrast series soft tissue algorithm, from C6- to sacrum. One post-myelogram study series, soft tissue algorithm, C6- to sacrum.

**BREED**

Bulldog

**COMPUTED TOMOGRAPHIC FINDINGS**

**SPINE (T1-T13, L1-S1 and caudal vertebrae).**

**SEX**

Castrated Male

At the level of T11-T12, within the ventral aspect of the vertebral canal, there is a mild to moderate amount of heterogeneous hyperattenuating material that mildly dorsally displaces and compresses the spinal cord. In addition, a vacuum phenomenon, narrowing of the intervertebral space, and spondylosis deformans are seen.

**AGE**

14

At the level of T13-L1, within the ventral aspect of the vertebral canal, there is a minimal amount of mildly hyperattenuating material; however, no evidence of dorsal displacement of the spinal cord.

At the level of L1-L2, within the ventral aspect of the vertebral canal, there is a mild amount of hyperattenuating material that mildly dorsally displaces and compresses the spinal cord. In addition, a complete bridging spondylosis deformans is seen.

**INTERPRETED BY**

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

A bulging disc is seen at the level of L2-L3.

At the level of L7-S1, within the ventral aspect of the vertebral canal and dislocated to the lateral foraminal region, there is a mild to moderate amount of hypoattenuating material impinging the spinal cord and roots. In addition, complete bridging spondylosis deformans, narrowed intervertebral space, and mildly irregular articular surface are seen.

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Spondylosis deformans is present at T5-T6, T7-T8, T8-T9, T11-T12, T12-T13, T13-L1, L2-L3, L3-L4 and L7-S1.

A small sign of vacuum phenomenon is present at T7-T8, incidental.

**REFERRING VET**

**CT Myelogram**

Jose Rivera

The contrast medium is seen within the subarachnoid after lumbar puncture.

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The ventral and dorsal line appearance is mildly reduced at the level of T11-T12, and cranially to this point, a dorsal line of the contrast medium is thin and not clearly identified; however, the ventral line of the contrast medium travels cranially until C6.

There is a mild focal reduction of the ventral line appearance at the level of L1-L2.

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4-25-23



**PATIENT** At the level of T8-T9, there is deviation of the ventral line appearance to the right and a minor reduction of the line.

Jagger Jagger

A small gas spot is also seen in the epidural spaces adjacent to the lumbar vertebrae, iatrogenic,

**SPECIES** On the collimated abdomen:

K9

The kidneys are mildly asymmetrical in size, with mildly irregular contour and a few microcysts and infarct areas.

**BREED** On the collimated thorax:

Bulldog

A ground glass appearance and patchy alveolar pattern are seen in the ventral portion of the lung lobes, more cranially.

**SEX**

Castrated Male

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- T11-T12 extradural material causing moderate spinal cord compression consistent with intervertebral disc herniation. At this location, there is more compression at the spinal cord, according to the myelogram finding, concurrent vacuum phenomenon, that could be incidental, and spondylosis deformans.
- L1-L2 extradural material causing mild spinal cord compression consistent with intervertebral disc herniation.
- T13-L1 minimal extradural material with no evidence of spinal cord compression.
- T8-T9 minimal extradural material with minimal evidence of spinal cord compression, ventral to the left side (the compression).
- Bulging disc at the level L2-L3.
- Mild L7-S1 disc protrusion causing mild impingement on the spinal cord and roots, spondylosis deformans.
- Multifocal thoracic and lumbar spondylosis deformans.
- Bilateral kidney microcysts, few areas of infarcts.
- Pulmonary passive atelectasis, the differential diagnosis includes less likely bronchopneumonia or aspiration pneumonia.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Multiple sites of disc herniation are seen in thoracic, thoracolumbar, and lumbar spine with variable amounts of material and spinal cord compression. The more evident site of compression based on the CT and Myelogram findings is T11-T12, ventral. An association with a complete neurological exam and a specialist consult is suggested for better definition and planning approach, including the surgical decompression.

**REFERRING VET**

Jose Rivera

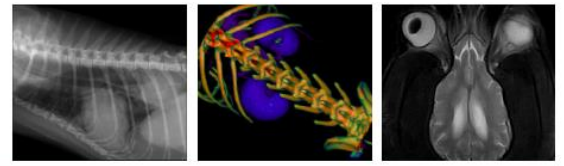
Correlate the pulmonary tomographic findings with the clinical signs.

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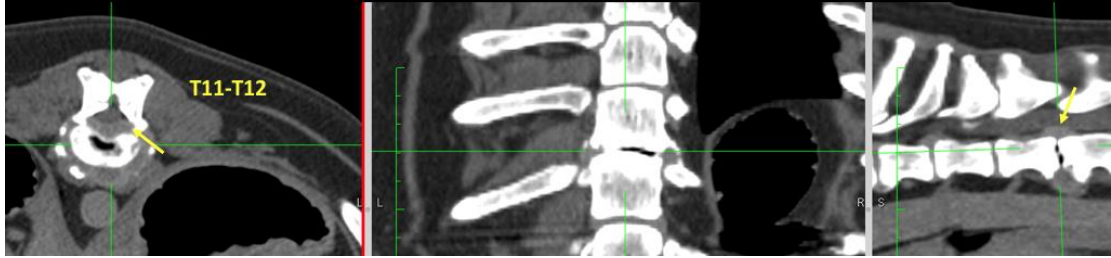
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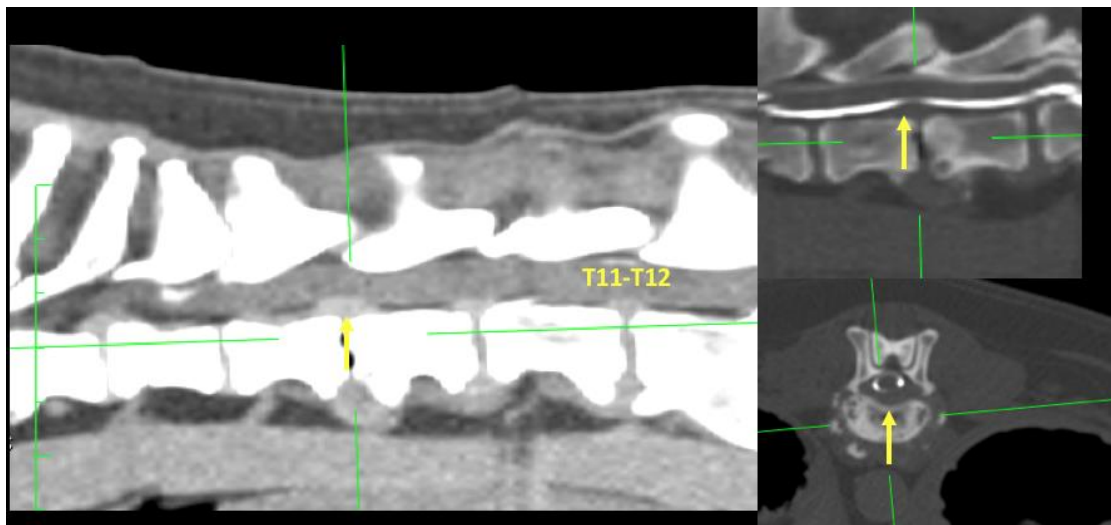
Bulldog

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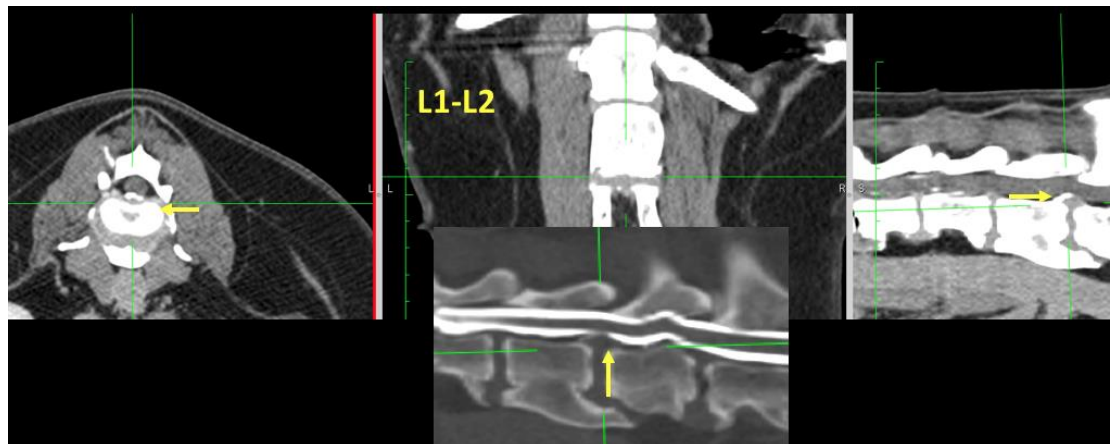


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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**SEX**

Castrated Male

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