



1901 Raymond Dr. Ste 5 Northbrook, IL 60062  
Phone: 833-738-2020 Fax: 847-429-3501

## Final Report

Patient Name: BUDDY SMITH      Patient Age: 10Y      Sex: F  
Species: Canine      Breed: Mixed      Spayed/Neutered: YES  
Responsible Person: John Smith      Test Site      Patient Weight: 20 kg  
Patient ID: T-400-05-21-19-02      Accession Number: 400-09092007-ABD

Referring Physician: Jenny Veterinarian DVM      Number of Images: 4

Reason for Order: Pet brought in today for evaluation of Left rear leg inconsistently limping, and generally not walking normally

Modality: DR      Study Description: Extremities – Pelvis, Stifle  
Spine – Lumbar/Abdomen - Routine

Date/Time of Service: 05/21/19 09:58      Receive Date/Time: 05/21/19 10:05

### OBSERVATION:

Study: Orthogonal views, four images of the abdomen, pelvis, and pelvic limbs are available

#### Radiographic Findings:

The lumbosacral intervertebral disc space is narrowed and incompletely bridged by spondylosis deformans.

The muscle mass of the pelvic limbs is decreased, more severe in the right.

No aggressive or acute traumatic osseous abnormalities are identified.

The stifle and coxofemoral joints are normal.

The urinary bladder is moderately filled with the apex in the plane of L5-L6 and contains at least three ovoid shaped mineral opaque calculi measuring up to 0.2 cm in length.

The renal silhouettes are normal in size and contour.

The caudoventral margins of the hepatic silhouette extend 2.75 cm caudal to the costal arch and are rounded in contour.

The splenic margins are normal.

The stomach and small intestine are non-dilated and normally positioned.

The colon is non-dilated and contains a moderate amount of heterogenous soft tissue opaque fecal material.



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Conclusions:

1. Lumbosacral intervertebral disc disease and spondylosis deformans with or without spinal compression. Consider stenosis. MRI, CT +/- myelography may be useful in further evaluation of the spinal cord and localization of compression.
2. Pelvic limb disuse muscle atrophy.
2. Generalized hepatic enlargement secondary to metabolic, inflammatory, or infiltrative disease.
3. Non-obstructive urinary cystic calculi.

Electronically signed by:

Approval Date/Time: 05/21/19 10:16

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