



PATIENT

Bettie Lous Logue

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

9 Years

WEIGHT

9.5 Pounds

INTERPRETED BY

Heike Rudorf, DVM, Dr.
med. Vet., DipECVDI
DVR

IMAGING PERFORMED BY

Dr. Jennifer Todd

HOSPITAL NAME

Lambs Gap AH

REFERRING VET

Dr. Jennifer Todd

INVOICE

35623

DATE

1/30/26

PRESENTING CLINICAL SIGNS

Imaging performed by: Dr. Jennifer Todd

Referring Veterinarian: Dr. Jennifer Todd

Hospital Name: Lambs Gap Animal Hospital

Email Address: lambsgap@comcast.net

Phone Number: (717) 732-9711

Notes to the Specialist: Bettie Lou is owned by my veterinary technician, Lisa

Patient Name: Bettie Lous Logue

Species: feline

Gender: FS

Age: 9 years

Weight: 9.5 pounds

Breed: DSH

History: owned by my veterinary technician. She was rescued about 2 years ago.

3–4-week history of Right front limb lameness which has progressed in severity despite Onsiar, Adequan and Solensia.

On exam today, Bettie is toe-touching lame in right front limb. She shows pain response on extension of right elbow. No paw abnormalities are seen.

RADIOGRAPHIC STUDY OF THE SHOULDERS AND ELBOWS

The muscle mass on the caudal humerus appears less opaque on the right and is slightly reduced in depth.

The bones are well mineralized, have a normal trabecular structure and smooth, continuous surfaces. Cortico-medullary development and differentiation of the long bones are physiological.

Shoulders: the joints appear congruent with even subchondral bone surfaces.

Elbows: the joints appear congruent with even surfaces. A round, bony structure is located on the medial to the medial condyle. The amount of soft tissue is increased compared to the lateral aspect.

RADIOGRAPHIC DIAGNOSIS

R elbow

- Possible swelling medial aspect
- Bony structure medially
- Possible muscle atrophy, mild

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS



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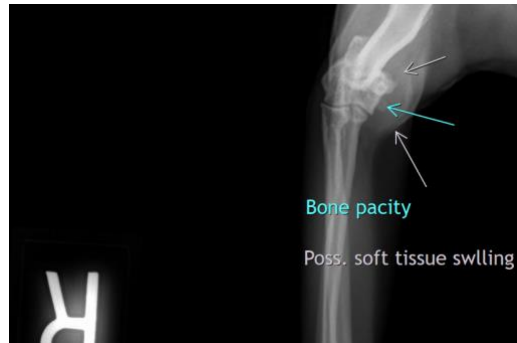
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The cranio-caudal view of the elbows suggests pathology on the R but further studies are needed to confirm this. Ideally a CT examination should be performed which will also help to rule out myositis, tendinitis and neuropathy of the plexus brachialis. The latter is important because of the intractable lameness and duration of clinical signs. The alteration in muscle opacity can be exposure related or due to atrophy.



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.

Heike Rudorf, DVM, Dr. med. vet., DipECVDI, DVR
info@sonopath.com