



**PATIENT PRESENTING CLINICAL SIGNS**

**Opal Young** History (Subjective) 3 weeks prior noticed sl limp RF, would walk it off then seem ok; usually after getting up from laying down. ~ 1 week prior starting to walk with RF held up. Cross over of RF over LF while walking and laying down has been a 5 days.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: palpation of right axillary area finds that the scapular to humeral to radial axis feels deviated medially.  
**Feline**

**RADIOGRAPHIC STUDY OF THE ELBOWS**

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

**SEX** The medial aspect of the right elbow joint appears to show a larger amount of soft tissue than the left. Smooth new bone formation is located on both medial coronoid processes and the left medial epicondyle. A small ossicle is located cranial to the elbow joint; a swelling is not evident.

**Female** A semicircular lucency appears to be present in the caudal R scapula just proximal to the subchondral bone of the glenoid. Irregular new bone formation is located on the distal scapula

**AGE RADIOGRAPHIC DIAGNOSIS**

- 14 Years**
- Pathology R scapula neck
  - Bilateral elbow arthrosis, mild
  - Bilateral deformation of the coronoid process
  - Ossicle cranial to the R elbow joint

**INTERPRETED BY**

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The degenerative changes are bilateral and thus unlikely to represent the reason for the unilateral lameness. Further images centered on the shoulder joint should be obtained to rule out a tumour.

**HOSPITAL NAME**

Blandford AH

**REFERRING VET**

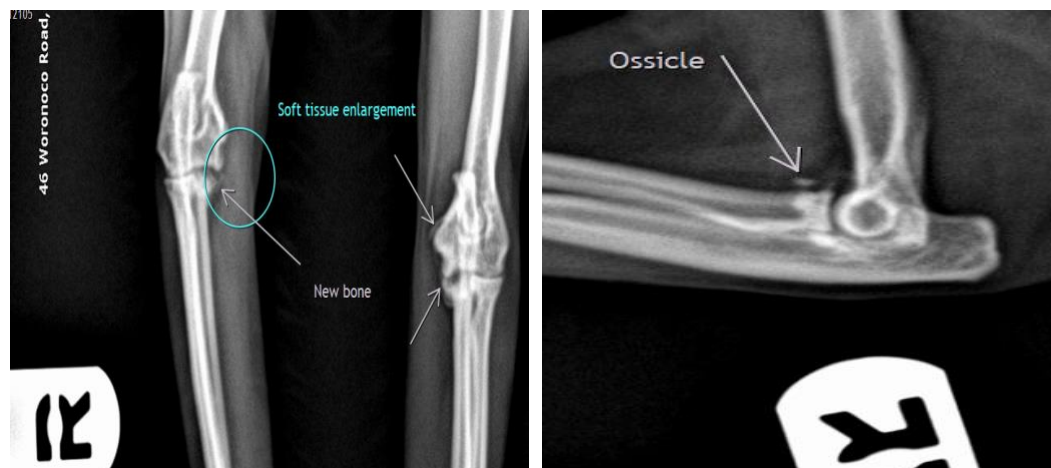
Dr. Russ Lapierre

**INVOICE**

17698

**DATE**

10/13/22





**PATIENT**

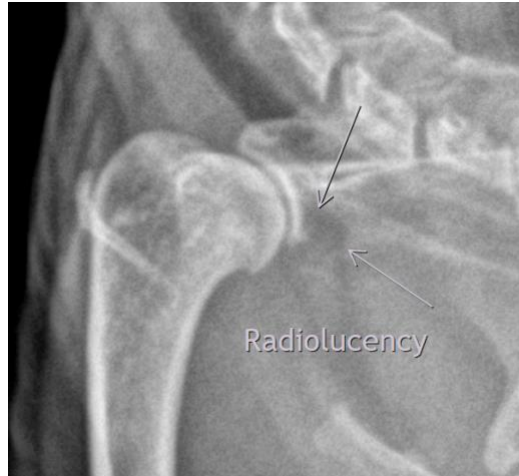
Opal Young

**SPECIES**

Feline

**BREED**

DSH



**SEX**

Female

**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.**

**AGE**

14 Years

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  
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