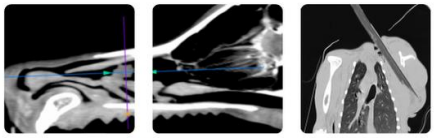

PATIENT

Fox Romay

SPECIES

Canine

BREED

Beagle

SEX

NM

AGE

9Y, 11M

WEIGHT

48.7lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Iyana

HOSPITAL NAME

DPC Veterinary Hospital

REFERRING VET

Dr. Rivera

INVOICE

72695

DATE

11-20-25

PRESENTING CLINICAL SIGNS

P is presenting limping on the LH and RF limbs. O says that is been more frequent recently where before on walks he would adjust his LH leg and then have a burst of energy to run. P is more quiet the past few days as well. A small mass noted between 3rd and 4th digits RH paw.

Abnormal PE/Chem/CBC/UA Results: Musculoskeletal: BCS = 7/9. Ambulatory x 4. No obvious lameness on ambulation. RF- Sl decreased ROM and slight discomfort on manipulation of elbow and shoulder joints. LH- decreased ROM of coxofemoral joint, no cranial drawer or tibial thrust present, mild crepitus on stifle. Assessment: Overweight Suspected multifocal early OA vs. soft tissue injury Interdigital mass: r/o cyst vs. MCT vs. sarcoma vs. other

RADIOGRAPHS OF PELVIS, STIFLES, SHOULDERS AND ELBOWS

Lateral and orthogonal views (R fore, L hind leg), totaling 5 radiographs provided for interpretation.

RADIOGRAPHIC FINDINGS

Hind legs

The skin surfaces are smooth, and the muscles appear to be symmetrically developed.

All bones are well mineralized, have a normal trabecular structure and a smooth surface. Spondylosis is present ventral to L6/7. The LS junction appears to have a narrow disc space. Cortical-medullary development and differentiation of the long bones are physiological.

Pelvis: the center of both femoral heads is located medial to the respective dorsal acetabular edge. Both coxo-femoral joints present smooth osseous margins and congruent joint spaces.

Stifle L: the joint presents with smooth, subchondral bone surfaces and the center of the femoral condyles is in line with the intercondylar eminence of the tibia. The cranial fat pad has a physiological size, and the caudal fascial plains are in a physiological position. New bone formation is not evident, and the patella is superimposed onto the lateral condyle.

Foreleg, R

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.

Shoulder: the joint appears congruent with even subchondral bone surfaces.

Elbow: the joint appears congruent with even surfaces.

RADIOGRAPHIC DIAGNOSIS

LS junction

- Possibly reduced disc space

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I can see no bony changes that would explain the clinical signs. In energetic dog diseases such as myositis (e.g. flexor myositis, gastrocnemius myositis), tendinitis or capsulitis can occur and cross sectional imaging (e.g. contrast CT) are necessary for a diagnosis. Depending on the results of the orthopedic examination compression of the cauda equina may be present due to disc disease at L7/S1.

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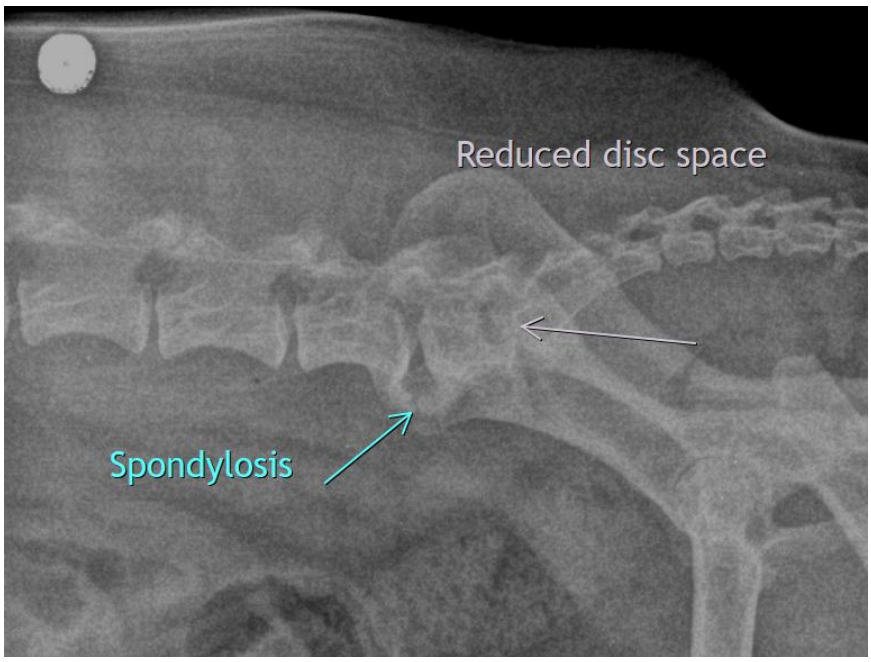

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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