



PATIENT

Tiko Reyes

SPECIES

Canine

BREED

Poodle Mix

SEX

Male

AGE

12Y, 2M

WEIGHT

10.8

INTERPRETED BY

Heike Rudolf, DVM, Dr.
med. Vet., DipECVDDI
DVR

IMAGING PERFORMED BY

JL/MF

HOSPITAL NAME

The Pet Hospital of
Stratford

REFERRING VET

Dr. Claudia Giuliani,
DVM

INVOICE

72458

DATE

11-3-25

PRESENTING CLINICAL SIGNS

Limping on R Hind limb for past 2 weeks.

Abnormal PE/Chem/CBC/UA Results: Thicken right stifle. No drawer sign appreciated

RADIOGRAPHS OF PELVIS AND STIFLES

R/L lateral and VD, totaling 3 radiographs provided for interpretation.

RADIOGRAPHIC FINDINGS

Hind legs

The muscle mass on the left tibia appears reduced on the lateral aspect.

All bones are well mineralized and have a normal trabecular structure. 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 labelled L: the joint presents with smooth, subchondral bone surfaces. The center of the femoral condyles is located just caudal to the intercondylar eminence of the tibia. The cranial fat pad is reduced, and the caudal fascial plains are mostly obscured by a soft tissue opacity in the joint. New bone (NB) formation is present on the distal pole of the patella, the proximal femoral ridges and the tibial insertion of the cranial cruciate ligament.

Stifle labelled R: the joint presents with smooth osseous margins 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 visible. New bone formation is evident on the caudal cortex level with the origin of the gastrocnemius muscles. The patella is located centrally in its groove.

RADIOGRAPHIC DIAGNOSIS

Left:

- Effusion/fibrosis
- Arthrosis
- Cranial tibial crest displacement

Right:

- NB origin gastrocnemius muscles

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes in the left stifle joint are consistent with a cranial cruciate ligament rupture. The mild muscle atrophy suggests a more chronic history and fibrosis may have set in so that a cranial drawer cannot be elicited in the conscious animal. The new bone on the right femoral cortex could be an incidental finding but may be associated with myositis of the gastrocnemius muscle. Other differential diagnoses include tendinitis of one digit and neuropathy of the lumbar plexus. All soft tissue changes can be best evaluated in cross sectional imaging, e.g., contrast CT.



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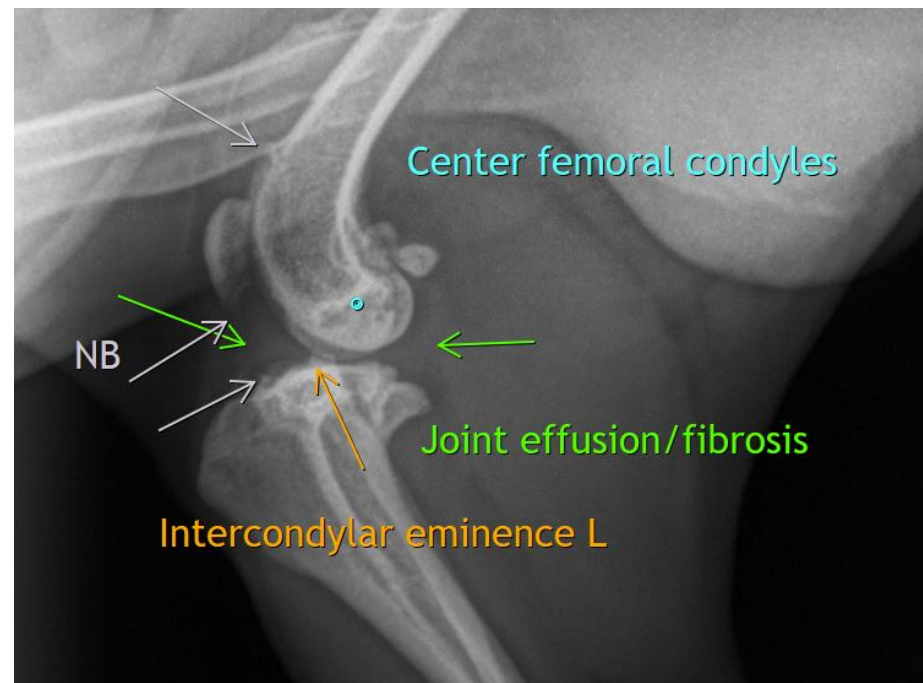
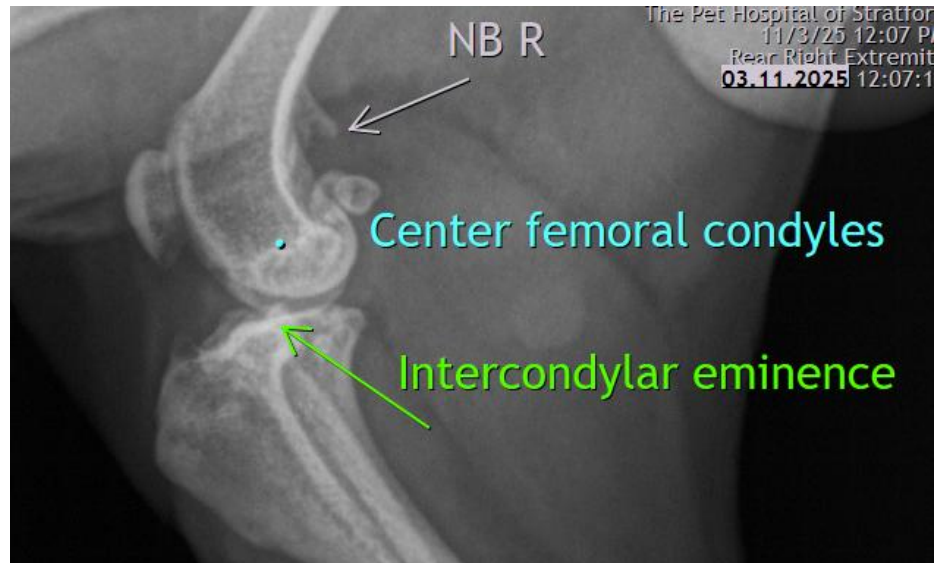
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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