



PATIENT

Krono Bertram

PRESENTING CLINICAL SIGNS

Presented for shifting leg lameness and overall ADR. O reports about 3-4 days ago, P seemed to be painful, was yelping out after trying to get up from laying down. O initially noticed limping on the RH leg, but now seems to be limping and favoring the L thoracic limb the last 48 hours.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: CBC/Chem/UA = pending. P hypersensitive to restraint and movement. Generalized shortened strides (like walking on egg shells). When manipulating hind end for exam, P whining and then submissive and will lay down. Generally painful on flexion and extension of hind limbs (R>L), thoracic limbs more painful on L during flexion/extension and hesitant to flex L elbow. No pain elicited on long bone palpation. No fever or areas of palpable inflammation. Good ROM on neck, non painful on palpation of spinal column.

BREED

German Shepard Mix

RADIOGRAPH OF THE ELBOWS

L and R lateral forelimb, cranio-caudal both elbows

SEX

MN

RADIOGRAPHIC FINDINGS

Both elbow joints

The skin surfaces are smooth and a good differentiation between muscles and fat is present.

AGE

1 Year

The elbow joints are congruent with smooth, subchondral bone surfaces. The medial coronoid process is smooth and pointed. The anconeal process is physiological.

INTERPRETED BY

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

The long bones have smooth periosteal surfaces. The medulla of humerus and ulna appear to have a homogeneously increased opacity.

RADIOGRAPHIC DIAGNOSIS

- Possible panosteitis

HOSPITAL NAME

Boca Park Animal
Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I can see no elbow changes that would explain the clinical signs. Shifting lameness and pain is highly suggestive of panosteitis. Usually, bone islands or a thumb print like increased opacities are present but the disease can affect the entire medulla. However, if no pain on deep palpation of the long bones is present, generalized joint disease such as Lyme disease or immune mediated arthritis will have to be considered. Conservative treatment with rest and NSAIDs can be tried initially and could be followed by a CT examination if there is no response. A synovial fluid sample should be obtained from the carpal or tarsal joints even though no radiographic evidence of soft tissue swelling is present on the lateral views submitted.

REFERRING VET

Ashman

INVOICE

49219

DATE

12-23-21



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The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

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