



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Charlie Kerns History: P has intermittent left hindlimb lameness with pain/decreased range of motion of the left limb extension. Known moderate separation anxiety.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: P is overweight Subjectively mild positive Cranial Drawer sign during sedated evaluation to get radiographic images

Canine

**RADIOGRAPHIC STUDY OF THE PELVIS AND STIFLES**

**BREED** The muscles mass on the left thigh appears to be reduced.

Labrador Retriever

**Pelvis**

**SEX**

The center of both femoral heads is located lateral to the respective dorsal acetabular edge. Both medial joint spaces appear widened, and the cranial acetabular edge is sclerotic and slightly straightened. Mild new bone formation is evident on both femoral necks.

Spayed Female

**Stifles**

**AGE**

Both stifle joints have smooth subchondral bone surfaces, and the centre of the femoral condyles is in line with the intercondylar eminence. The cranial fat pad of the right has a physiological size, and the caudal fascial plains are in a physiological position. On the left, the cranial fat pad is slightly reduced and the caudal fascial plains mildly caudo-ventrally displaced. A spur of new bone formation is present on the distal pole of the left patella and the tibial plateau appears to have two bony outlines.

2.2 Years

**INTERPRETED BY**

**RADIOGRAPHIC DIAGNOSIS**

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

- Bilateral HD and OA
- L stifle effusion and arthrosis, mild

**HOSPITAL NAME**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Boca Park AH

The changes are suggestive of cruciate ligament damage on the left and support the clinical finding of instability. Hip dysplasia can predispose animals to cruciate ligament disease and thus the other leg should be monitored.

**REFERRING VET**

Tifanie Silver

**INVOICE**

13740

**DATE**

2/3/22



**PATIENT**

Charlie Kerns

**SPECIES**

Canine

**BREED**

Labrador Retriever

**SEX**

Spayed Female

**AGE**

2.2 Years

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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  
dr.h.rudorf@gmail.com