



**PATIENT**

Saoirse Bookstaver

**PRESENTING CLINICAL SIGNS**

Left front leg lameness for 2 weeks. Not responsive to Rimadyl.

**SPECIES**

K9

**RADIOGRAPH OF ELBOWS AND CARPI**

Lateral L foreleg shoulder to paw, flexed L elbow, cranio-caudal both forelegs shoulder to elbow, cranio-caudal/DP both forelegs elbow to digits.

**BREED**

Labrador Retriever

**RADIOGRAPHIC FINDINGS**

The muscle mass surrounding the left humerus appears slightly reduced.

**SEX**

F

Skeletal immaturity compatible with the given age is noted. Metacarpal (MC) 2-4 on the left show ill-defined, increased medullary opacities with loss of the clear medial cortical outline in MC 4.

Elbow and carpal joints are congruent with smooth subchondral bone surfaces.

**AGE**

7 Months

**RADIOGRAPHIC DIAGNOSIS**

- Panosteitis left metacarpal
- Muscle atrophy mild, left humerus

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The changes are highly suggestive of panosteitis, and deep palpation of the metacarpal should elicit a pain response. Should conservative treatment not reduce the clinical signs within 4 weeks, a CT examination will have to rule out fissures in the medial coronoid process.

**INTERPRETED BY**

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

**HOSPITAL NAME**

Blairstown Animal  
Hospital

**REFERRING VET**

Dr. Zeliff

**INVOICE**

50982

**DATE**

3-16-22



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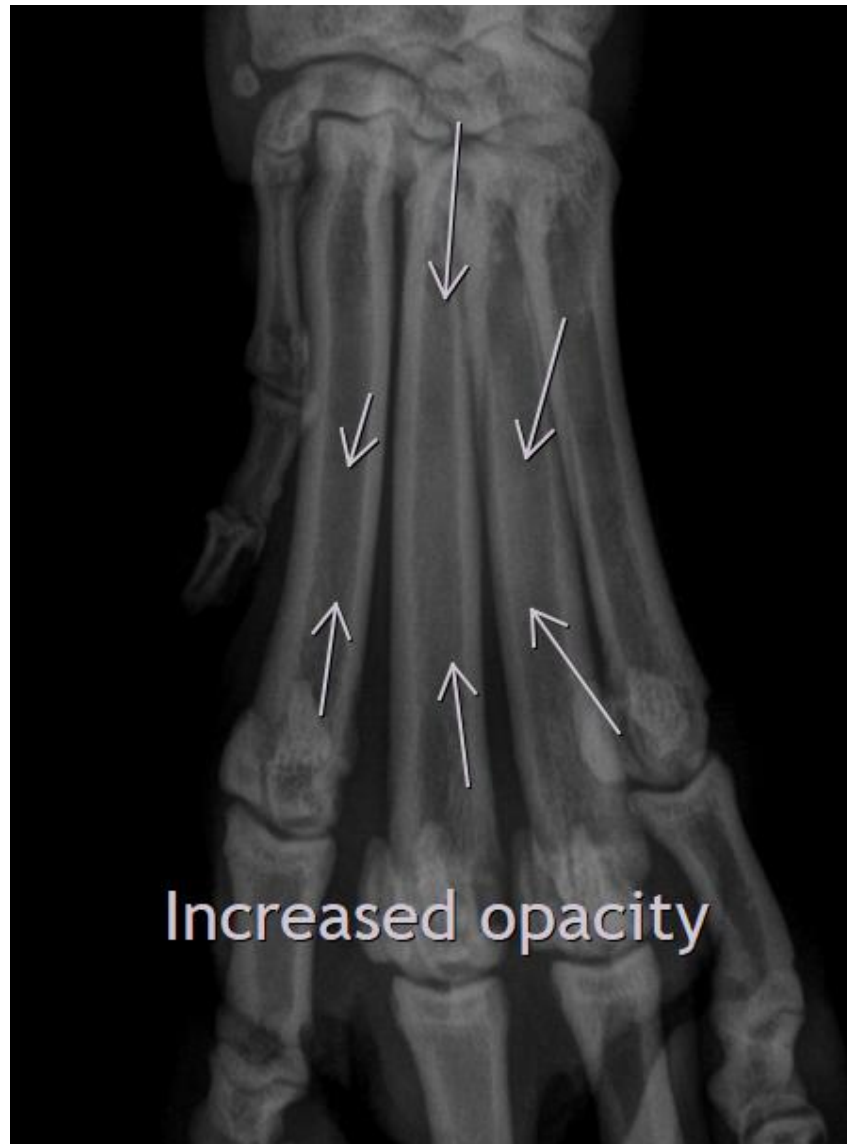
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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**  
Dr.H.Rudorf@gmail.com