



PATIENT

Luna Anderson

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

5.5Y

WEIGHT

10.4lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jennifer Todd

HOSPITAL NAME

Lambs Gap Animal
Hospital

REFERRING VET

Dr. Jennifer Todd

INVOICE

73995

DATE

3-2-26

PRESENTING CLINICAL SIGNS

Luna lives indoors. In the past 8 weeks, Luna has had intermittent left front limb lameness. She was declawed at a young age. Her lameness did not improve with Onsior and Luna will not eat Dasuquin joint supplement.

Luna's owner reports that she still jumps and plays but will have a subtle LF lameness at a walk and hold her LF paw up when sitting sometimes.

On exam, no abnormalities or pain response are seen with range of motion or palpation of shoulder, elbow, carpus or paw

RADIOGRAPHS OF ELBOWS AND PAWS

R/L lateral and DP, totaling four radiographs provided for interpretation.

RADIOGRAPHIC FINDINGS

The muscle mass is symmetrically developed and physiological.

The bones are well mineralized, have a normal trabecular structure and smooth, continuous surfaces. Cortico-medullary development and differentiation of the long bones are physiological.

Elbows: the joints appear congruent with even surfaces.

Paws: there seems to be a mild soft tissue asymmetry between digits 3 P3. All claws are missing; their former location is visible on all digits on the left paw and on only two on the right. The sesamoid bones are physiologically developed and have smooth surfaces. The joints are congruent.

RADIOGRAPHIC DIAGNOSIS

- Possible soft tissue asymmetry P3 digits 3

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I can see no bony cause for the lameness. The perceived soft tissue asymmetry may just be a positional artefact especially as physical examination has not elicited a pain response. Flexor myositis, tendinopathies and brachial plexus neuropathies can only be detected in cross section imaging. Declawing can lead to peripheral nerve damage and cause hyperesthesia.



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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