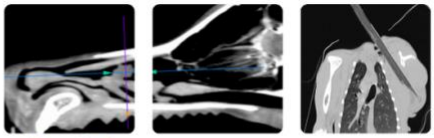

PATIENT

Thor O'Brien

SPECIES

Canine

BREED

Belgian Malinois

SEX

Male

AGE

10 Years 1 Month 3 Days

WEIGHT

36.8 kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

AMC

HOSPITAL NAME

Green Dog Dental & Wellness

REFERRING VET

Dr. Hab

INVOICE

36140

DATE

3/5/26

PRESENTING CLINICAL SIGNS

- Lameness started yesterday (client reports conflicting timeline of 1-2 days ago)
- Recurring lameness issue, usually affects front limbs but currently affecting right hind limb
- Goes to Physical Therapy to manage mild arthritic signs
- Currently on carprofen twice daily
- Reduced exercise tolerance (unable to complete usual 1.5 hour walk)
- History of excessive perianal licking, previously treated with steroids twice

RADIOGRAPHIC STUDY OF PELVIS AND STIFLES

Spine

The surrounding soft tissue structures appear physiological.

The shape of the included vertebrae is physiological; their surfaces are smooth. No evidence of osseous destruction or lysis is present along the spine.

The disc spaces appear to be relatively even.

The cranial aspect of the prostate is visible just cranial to the pubic brim and the rectum is slightly displaced dorsally.

Hind legs

The muscles appear to be symmetrically developed.

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

Pelvis: the center of both femoral heads is superimposed over the respective dorsal acetabular edge. Both coxo-femoral joints present smooth osseous margins and congruent joint spaces. A very fine, sclerotic line is present along the left femoral neck.

Stifle L: the joint presents with smooth, subchondral bone surfaces 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 in a physiological position. Cranial as well as caudal meniscal edges are apparent. New bone formation is not evident, and the patella is located centrally in its groove.

Stifle 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, some soft tissue strands obscure the outline of the cranial meniscus. The caudal fascial plains are very slightly caudally displaced when compared to the left, the outline of the caudal meniscus is obscured. New bone formation is not evident, and the patellae are located centrally in its groove.

RADIOGRAPHIC DIAGNOSIS

R stifle

- Effusion, very mild

Incidental findings

- Prostatomegaly, mild
- New bone right femoral neck, mild

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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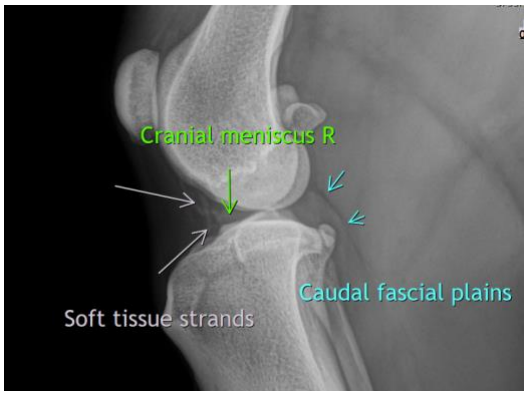
The changes in the right stifle joint are minimal but could be associated with meniscal damage. Tears in the cruciate ligament are usually associated with a larger joint effusion. Conservative therapy is suggested with clinical reassessment in 4-6 weeks; earlier should the lameness progress. Fore leg lameness in the breed could be due to elbow dysplasia with arthrosis; multiple joint pain can be caused by Borreliosis. Depending on the speed and distance covered during the 1.5-hour long walks, the fatigue may be age related, otherwise cardiac disease should be ruled out.



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.

Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com