



**PATIENT PRESENTING CLINICAL SIGNS**

**Cooper Marques** History: Patient presented for intermittent non weight bearing on left pelvic limb. Owner states plays a lot and could have hurt it. Will yelp when touched. Possible partial cranial drawer on exam, no tibial thrust.

**SPECIES RADIOGRAPHIC STUDY OF PELVIS AND STIFLES**

**Canine** The skin surfaces are smooth, and the muscles appear to be symmetrically developed.

**BREED** All bones are well mineralized, have a normal trabecular structure and a smooth surface. Cortical-medullary development and differentiation of the long bones are physiological.  
**Poodle Mix**

**Pelvis**

**SEX** The centre of both femoral heads is located medial to the respective dorsal acetabular edge. Both hip joints appear congruent with even subchondral bone surfaces. No new bone formation is evident.  
**Neutered Male**

**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 has a physiological size, and the caudal fascial plains are in a physiological position; the joint with the L marker suggests a very mild decrease of the proximal fat in the fascial plains. New bone formation is not evident, and the patellae are superimposed onto the lateral femoral condyles.  
**5 Years**

**INTERPRETED BY RADIOGRAPHIC DIAGNOSIS**

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

- Possible asymmetry of caudal fascial plains on left

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**HOSPITAL NAME** The possible asymmetry of the fascial plains is most likely due to rotation as the two condyles are not as completely superimposed as on the other side. I can see no abnormality that would explain the clinical signs. A soft tissue injury (muscle tear, myositis, joint capsule injury, tendinopathy) is likely but the dog should be re-examined after a period of lead exercise and pain killers in case an effusion has developed somewhere along the leg. A grade 1 or 2 patella luxation appears unlikely considering the age.  
**Boca Park AH**

**REFERRING VET**

**Dr. Corinna Gorgon**

**TECHNICAL COMMENTS**

**INVOICE** The marker on the stifle views differs from the label on the DICOM image.

14783

**DATE**

4/15/22



**PATIENT**

Cooper Marques

**SPECIES**

Canine

**BREED**

Poodle Mix

**SEX**

Neutered Male

**AGE**

5 Years

**INTERPRETED BY**

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

**HOSPITAL NAME**

Boca Park AH

**REFERRING VET**

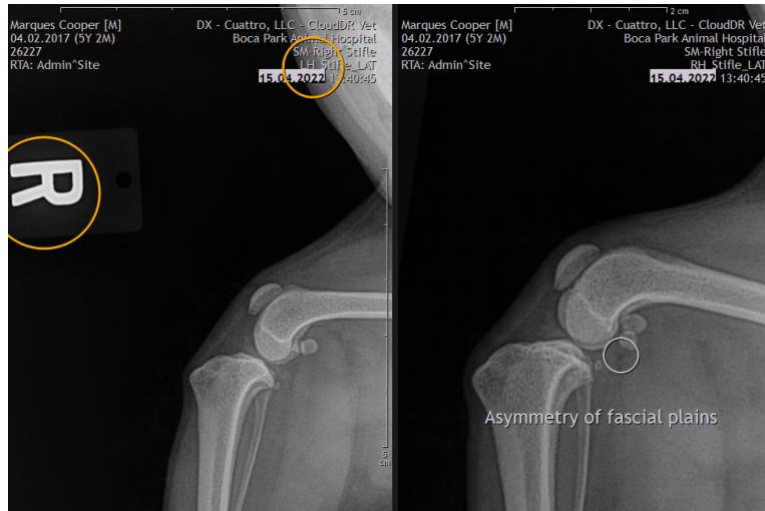
Dr. Corinna Gorgon

**INVOICE**

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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.

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