



PATIENT PRESENTING CLINICAL SIGNS

Hunter Caceres History: Reason for Visit: Limping LH History: P presents for limping of LH. O states that P began limping about 1 week ago. At times P will not bear weight on leg but other times P will run around like nothing is wrong. P is otherwise healthy.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Hydration: Appropriately hydrated Mentation: BAR EENT: No nasal discharge; clear no discharge OU; clean no exudate AU; No cough on tracheal palpation. Oral Cavity: scant dental tartar present Lymph Nodes: Symmetrical, no changes in size, shape, consistency Skin: Good hair coat, no signs of ectoparasites. No lesions noted. CV/Respiratory: No murmur or crackles/wheezing auscultated. Synchronous pulses, normal rate. Normal bronchovesicular sounds. Abd/GI: Soft non painful abdomen, no organomegaly, no abnormalities on abdominal palpation Uro/Perineum: N Musculoskeletal: Ambulatory x4, intermittent WB lame on LH. No cranial drawer noted. BCS 6/9 Neurological: Appropriate Diagnostic Testing Needed: LH rads Declined Diagnostics/Treatments: Findings: rads - consult pending Assessment: LH lame r/o soft tissue injury, boney injury, CCL rupture, other.

BREED

Boston Terrier

SEX

Neutered Male

RADIOGRAPHIC STUDY OF THE STIFLES

AGE

3 Years 7 Months

The medial thigh muscles on the left appear slightly reduced, compared to the right side.

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.

INTERPRETED BY

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

The left stifle joint has 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. New bone formation is not evident and the patella is located in its groove.

RADIOGRAPHIC DIAGNOSIS

HOSPITAL NAME

DPC Veterinary
Hopsital

- Possible left muscle atrophy
- Transitional last lumbar vertebra

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Dr. White

The possible loss of muscle mass on the left could be a positional artefact or due to a decreased weight bearing and will have to be accurately assessed with a tape measure. I can see no changes that would explain the clinical sign. Soft tissue injuries resulting in myositis or tendinitis can only be identified with contrast CT or MRI.

INVOICE

15786

TECHNICAL COMMENTS

Unprotected fingers in scatter

DATE

5/27/22



PATIENT

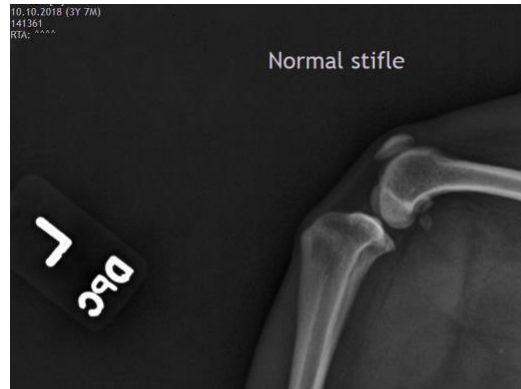
Hunter Caceres

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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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