



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Brooks Lockhart  
**HISTORY:** Presented with a history of difficulty walking and going up and down the stairs for almost a year. On the exam we noted bilateral muscle atrophy on hind legs . She is overweight with body condition score of 7/9. On the flexion an extension of both hips joints she elicited some sings of pain and discomfort.

**SPECIES**

Canine

**RADIOGRAPHIC STUDY OF THE PELVIS**

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

**BREED**

Mini Golden Doodle

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.

**SEX**

Spayed Female

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.

**RADIOGRAPHIC DIAGNOSIS**

- Normal hips

**AGE**

8 Years

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

I can see no changes in the hip joints or pelvis that would explain the clinical signs. Since the signs are bilateral a disc protrusion is possible thus a neurological examination may have to be followed by cross sectional imaging. Changes such as myositis (e.g. gastrocnemius muscle) or tendinitis can only be identified with MRI or contrast CT.

**INTERPRETED BY**

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

**HOSPITAL NAME**

Beaches-Fallingbrook  
 VC

**REFERRING VET**

Dr. Matt Haghighat

**INVOICE**

15065

**DATE**

5/5/22





**PATIENT**

Brooks Lockhart

**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.**

**SPECIES**

Canine

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

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