



PATIENT

Bruno Fleury

PRESENTING CLINICAL SIGNS

Obtained at 6 months of age as unwated puppy. In the house couch potato, outside does like to play. No knoww trauma. Was to mother's a month ago and came back lame without apparent cause. In subsequent month will improve somewhat but then becomes lame after playing in the yard. In exam room Grade 2 lame. Nonsensitive to limb flexions, extentions but does become tense when being handled. Very sl soft tissue swelling of antebrachium right side as compared to left.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: none

BREED

American Stafford Terrier

RADIOGRAPHIC STUDY OF THE ELBOWS

1x DP R antebrachium and oblique elbow, 1x lateral R shoulder to carpus, 1x L lateral elbow,

RADIOGRAPHIC FINDINGS

SEX

Male

The joint spaces are not clearly outlined thus congruency is difficult to assess.

R elbow

A rim on granular calcification/new bone formation extends from the anconeal process to the head of the radius.

AGE

5 Years

L elbow

Smooth new bone is present on the cranial radial head and the medial epicondyle. The medial coronoid process appears blunted and sclerotic.

INTERPRETED BY

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

RADIOGRAPHIC DIAGNOSIS

- Elbow OA, R worse than L
- Suspected coronoid pathology L
- Shoulder OA L worse than R

HOSPITAL NAME

Blandford Animal Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Russ LaPierre

The changes are highly suggestive of arthrosis related to a coronoid pathology. In cases of non-displaced FCP even a small trauma can cause displacement of the fragment and thus lameness. CT of both elbow joints is recommended for further assessment and possible surgery planning. In case of soft tissue swelling a contrast examination should be added.

INVOICE

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DATE

8-30-21



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The information and recommendations provided are based on the images presented by the referring veterinarian. 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 Rudorf, DVM, Dr. med. vet., DipECVDI, DVR
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