

**PATIENT PRESENTING CLINICAL SIGNS**

Max Kinney History: Intermittent non-weight bearing Left hindleg lameness last 4 weeks. No history of trauma. Resists any extension of either hip. Slight muscle atrophy left thigh. No other abnormalities noted in knees, ankles or feet.

SPECIES RADIOGRAPHIC STUDY OF THE PELVIS AND STIFLES

Canine The muscle mass on the left thigh is significantly reduced.

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.

Mixed The centre of both femoral heads is located well lateral to the respective dorsal acetabular edge. Both hip joints are incongruent with medial and lateral joint space widening. Bilabiation is present on both sides and new bone formation surrounds the femoral necks and is present on the dorsal acetabular edges, worse on the left.

SEX

Neutered Male 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. New bone formation is not evident and the patellae are located in their respective groove.

AGE

6 Years

RADIOGRAPHIC DIAGNOSIS**INTERPRETED BY**

- Bilateral HD
- Bilateral OA
- Left sided muscle atrophy

Heike Rudolf, DVM,
Dr. med. Vet.,
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**HOSPITAL NAME**

The hip changes are present on both sides and appear almost symmetrical. Thus, a unilateral muscle atrophy is unusual and a separate disease may be present on the left leg. Therefore, cross sectional imaging is recommended to rule out a neural tumor or inflammation of a nerve of the lumbar plexus.

Gentle Doctor AH

REFERRING VET

Dr. Megan Belfiore

INVOICE

17307

DATE

9/13/22



PATIENT

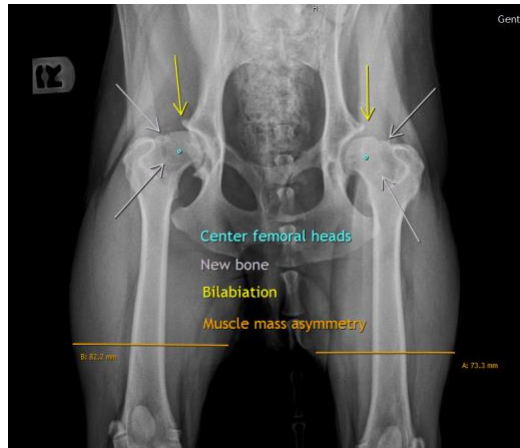
Max Kinney

SPECIES

Canine

BREED

Mixed



SEX

Neutered Male

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.

AGE

6 Years

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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