



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Bruno Plaza History: Chief Complaint: LIMPING ON L REAR FOR A FEW WEEKS History: LIMPING ON LEFT REAR FOR 2 WEEKS

SPECIES Canine
BREED Golden Retriever
 Abnormal PE/Chem/CBC/UA Results: CV/Respiratory: Normal heart rate and rhythm, no murmur, pulses strong and synchronous, normal bronchovesicular sounds. EENT: Clear OU. AU: mild brown cerumen, no erythema or swelling present. No nasal discharge. No cough on tracheal palpation. Oral cavity: Mild dental tartar Musculoskeletal: BCS = 5/9. Ambulatory x 4. LH: grade 1-2/5 lameness, "click" on manipulation of coxofemoral joint, suspected + cranial drawer sign and tibial thrust, mild muscle atrophy. R coxofemoral joint: crepitus (mild), "click" Uro/Perineum: intact male, 2 descended testicles Abd/GI: Soft, non-painful. No masses or fluid wave palpated Lymph Nodes: No peripheral lymphadenopathy Neurological: Alert and appropriate. No significant abnormalities Skin: Good hair coat. No ectoparasites seen Mentation: BAR Hydration: N

RADIOGRAPHIC STUDY OF PELVIS AND LEFT STIFLE

SEX Male
 The thigh muscles are atrophied on the left side.

The skeletal structures are well mineralized, have a normal trabecular structure and smooth surfaces.

AGE 4 Years 1 Month
 The hip joints are incongruent with widening of medial and lateral joint spaces. Both cranial acetabular edges are steep and undulating. The centre of both femoral heads is located medial to the respective dorsal acetabular edge. A moderate amount of new bone formation is present along the femoral necks and L caudal acetabular edge. Bilabiation is present on the left acetabulum.

INTERPRETED BY Heike Rudolf, DVM, Dr. med. Vet., DipECVDI DVR
 The left stifle joint has smooth subchondral bone surfaces. The cranial fat pad has a physiological size and the caudal fascial planes are in a physiological position. New bone formation is not evident and the patellae are located in their respective groove.

HOSPITAL NAME DPC Veterinary H

RADIOGRAPHIC DIAGNOSIS

- REFERRING VET** Dr. Rivera
- Muscle atrophie left
 - Bilateral HD with OA

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE 12964
 The bony changes are long standing but a soft tissue injury may have caused the acute lameness. The marked difference in muscle mass may, however, be due to a neurological problem e.g. neuritis or lumbar plexus tumor. Cross sectional imaging is necessary if the dog does not respond to conservative therapy.

DATE

9/3/21



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Bruno Plaza

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Canine

BREED

Golden Retriever

SEX

Male

AGE

4 Years 1 Month

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Heike Rudorf, DVM,
Dr. med. Vet.,
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REFERRING VET

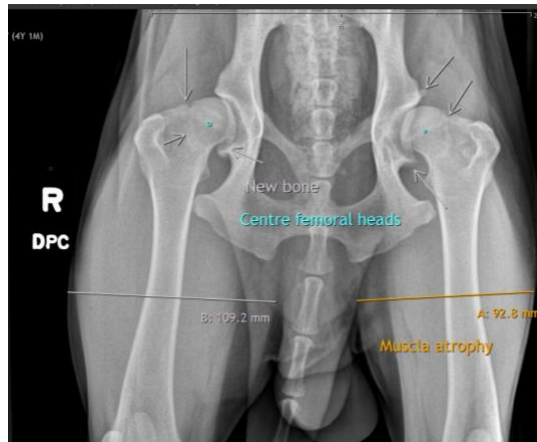
Dr. Rivera

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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.

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