



## PATIENT

Potato Sander

## SPECIES

Canine

## BREED

Pitbull

## SEX

MN

## AGE

2Y

## WEIGHT

53.8lbs

## INTERPRETED BY

Dr. Leticia Utsch MV

## IMAGING PERFORMED BY

Montresor

## HOSPITAL NAME

Foxfield Veterinary Services

## REFERRING VET

Matt Montresor

## INVOICE

75209

## DATE

5-28-26

## PRESENTING CLINICAL SIGNS

Hx of bilateral TPLOs in 2025 (L done 3/2025). Normal recovery from both. 2 weeks ago, SC mass developed along L medial stifle. Asymptomatic. Afebrile.

Abnormal PE/Chem/CBC/UA Results: PE: 3x3x1 cm soft, partially crepitant, freely movable SC mass on L medial crus at distal aspect of TPLO incision/implant. Non-painful on palpation. FNA of mass with path review: Mixed inflammation (predominantly neutrophils, with less numbers of macrophages) and intracellular and phagocytized bacterial cocci.

## RADIOGRAPHIC STUDY OF THE PELVIS AND LEFT STILE

Radiographs of the pelvis and the left stifle in one imaging plane are provided for review.

## RADIOGRAPHIC FINDINGS

The hip joints are incongruent.

The femoral head and neck are mild to moderately remodeled, bilaterally.

TPLO plate fixed with five screws in the proximomedial aspect of the tibias. The tibias are fully consolidated and there is expected remodeling of their proximal aspect. No bone lysis seen.

In the medial aspect of the left tibia, there is an ill-defined soft tissue mass, measuring around 3,2 cm length. Equivocal regular periosteal reaction seen adjacent to the mass and TPLO plate.

## RADIOGRAPHIC DIAGNOSIS

- Mild-to-moderate degenerative joint disease of the hips secondary to hip dysplasia;
- Soft tissue mass adjacent to the left TPLO site may be related to focal infection.

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The soft tissue mass adjacent to the previous left TPLO surgical site is most suspicious for a localized bacterial or implant-associated infection/ abscess formation. The cytology results support this diagnosis. No radiographic evidence of implant loosening or osteomyelitis is clearly identified. Soft tissue neoplasia (e.g.: mast cell tumor) is considered less likely given the cytologic findings, although it cannot be completely excluded. Correlation with bacterial culture and susceptibility testing is recommended. If the lesion fails to resolve with empirical therapy, repeat sampling, biopsy, and orthopedic consultation may be beneficial.



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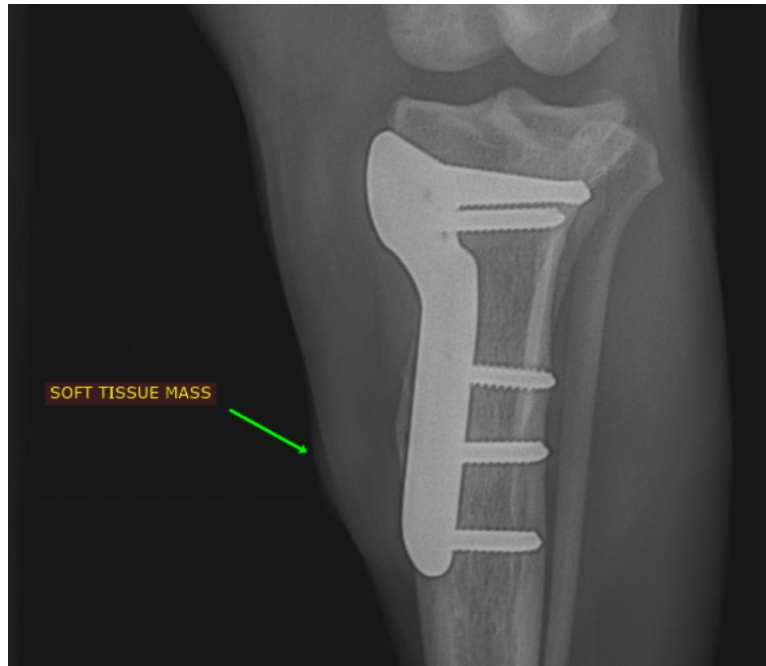
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Dr. Leticia Utsch MV**  
[info@sonopath.com](mailto:info@sonopath.com)