



## PATIENT

Finnegan Lucas

## SPECIES

Canine

## BREED

Border Collie

## SEX

M

## AGE

4Y

## WEIGHT

20kg

## INTERPRETED BY

Nele Eley (Ondreka),  
DVM Dr. med. vet.,  
DipECVDI

## IMAGING PERFORMED BY

David Lane

## HOSPITAL NAME

Points East West  
Veterinary Services

## REFERRING VET

David Lane

## INVOICE

73277

## DATE

1-12-26

## PRESENTING CLINICAL SIGNS

Finnegan is a competition agility dog presenting with a difficult to localize left forelimb lameness that started in October and is worse after activity, upon rising from rest, and is particularly exacerbated by sprinting. The only abnormality noted on examination is inconsistently elicited and mild point tenderness on palpation of the left biceps tendon and craniomedial compartment. Radiographs taken by rDVM show a mild osteophyte at the caudal aspect of the right humeral head.

## ULTRASONOGRAPHIC FINDINGS

### Left Shoulder

Mild anechoic effusion is present within the left biceps tendon sheath. The synovial lining appears mildly thickened. The intertubercular groove presents even and smooth without evidence of new bone formation. The biceps tendon itself is structurally normal with intact fibrillar pattern, smooth delineation, and uniform echogenicity.

The supraspinatus tendon has average maximum thickness of 7mm. The ultrasonographic echotexture is within age related normal limits. The tendon is smoothly delineated. There is no evidence of biceps impingement.

The subscapularis tendon presents within normal limits.

Mild even thickening of the visualized portions of the left glenohumeral ligament is noted. The ligament maintains normal delineation and echotexture. Full assessment is limited due to acoustic window.

### Right Shoulder

Mild anechoic effusion is present within the right biceps tendon sheath. The synovial lining appears mildly thickened. The intertubercular groove presents even and smooth without evidence of new bone formation. The biceps tendon itself is structurally normal with intact fibrillar pattern, smooth delineation, and uniform echogenicity.

The supraspinatus tendon has average maximum thickness of 7mm. The ultrasonographic echotexture is within age related normal limits. The tendon is smoothly delineated. There is no evidence of biceps impingement.

The subscapularis tendon presents within normal limits.

Mild even thickening of the visualized portions of the right glenohumeral ligament is noted. The ligament maintains normal delineation and echotexture. Full assessment is limited due to acoustic window.

## ULTRASONOGRAPHIC DIAGNOSIS

- Mild bilateral biceps tenosynovitis without structural tendon changes.
- Mild bilateral medial glenohumeral ligament thickening.

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

Mild and subtle changes of the bilateral biceps tendon sheath and medial glenohumeral ligaments are seen. The changes are subtle and bilaterally symmetric. The observed mild biceps tenosynovitis and medial glenohumeral ligament thickening may not necessarily correlate with the clinical left forelimb



## PATIENT

Finnegan Lucas

## SPECIES

Canine

## BREED

Border Collie

## SEX

M

## AGE

4Y

## WEIGHT

20kg

## INTERPRETED BY

Nele Eley (Ondreka),  
DVM Dr. med. vet.,  
DipECVDI

## IMAGING PERFORMED BY

David Lane

## HOSPITAL NAME

Points East West  
Veterinary Services

## REFERRING VET

David Lane

## INVOICE

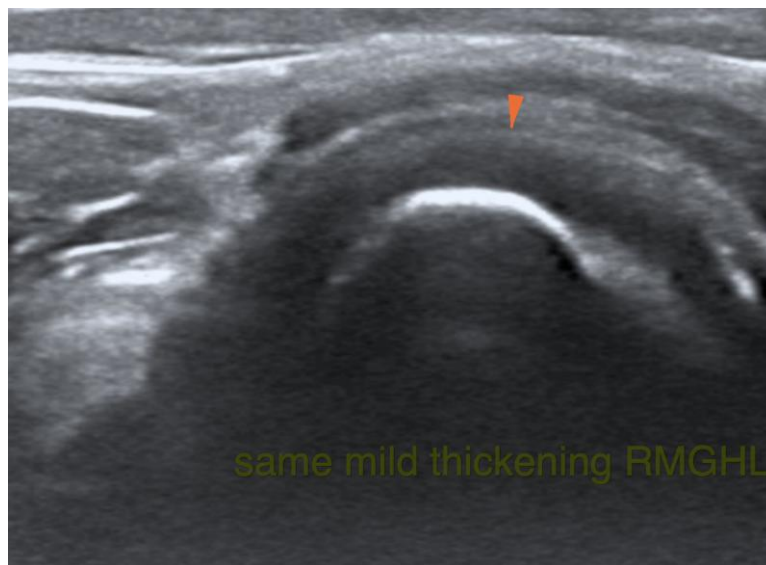
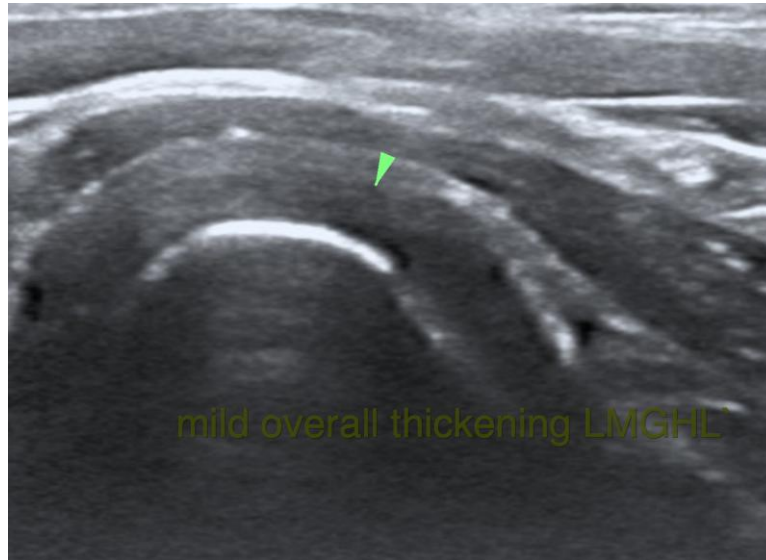
73277

## DATE

1-12-26

lameness, particularly given the subtlety and bilateral symmetry of the changes. Structural tendon pathology of the biceps or supraspinatus is not present making significant acute injury unlikely.

The limited acoustic window for the medial glenohumeral ligament should be considered when interpreting the findings. Advanced imaging such as MRI may be indicated if clinical suspicion persists. Differential considerations may include early repetitive strain or overuse changes.





## PATIENT

Finnegan Lucas

## SPECIES

Canine

## BREED

Border Collie

## SEX

M

## AGE

4Y

## WEIGHT

20kg

## INTERPRETED BY

Nele Eley (Ondreka),  
DVM Dr. med. vet.,  
DipECVDI

## IMAGING PERFORMED BY

David Lane

## HOSPITAL NAME

Points East West  
Veterinary Services

## REFERRING VET

David Lane

## INVOICE

73277

## DATE

1-12-26

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.

**Nele Eley (Ondreka)**, DVM, Dr. med. vet., DipECVDI

European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,

Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.

[info@sonopath.com](mailto:info@sonopath.com)