

**PATIENT**

Pashmina Finding
Them Homes Rescue

SPECIES

Canine

BREED

Shepherd X

SEX

F

AGE

1 Year

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Animal Health
Partners

REFERRING VET

Dr. Jeffery Biskup

INVOICE

49572

DATE

1-13-22

PRESENTING CLINICAL SIGNS

Unknown history, rescued from up north, and was brought down to Barrie 5 days ago. Left hindlimb lameness noted when brought to foster on Dec 30th. Will use the LH leg, but will knuckle, ataxic and will occasionally hop. When sitting she will lean more on the right leg, and will hold the LH out. There is decreased to almost absent proprioception in LH, present in the RH. No pain in tarsus or hock noted. There is a bit of a bony prominence on the medial aspect of the stifle, but no pain elicited with manipulating, good ROM, and feels stable (perhaps due to some muscle wasting in that area it feels more prominent?). There is decreased ROM and pain in the coxofemoral joint.

COMPUTED TOMOGRAPHIC STUDY OF THE PELVIS

Plain study in soft tissue and bone windows available for review.

COMPUTED TOMOGRAPHIC FINDINGS

Bilateral iliosacral joint subluxation is seen with mild cranial displacement of the ilium on the right side and asymmetric widening of the sacroiliac joint on the left side. An oblique fracture of the iliac body caudal of the left sacroiliac joint is seen in the left hemipelvis. The caudal aspect of the left hemipelvis presents severe ventral and medial displacement. Multiple bilateral fractures of the pelvic floor involving the cranial and caudal rami of the pubic bone are seen allowing for narrow diameter of the pelvis. All fracture margins are rounded with a moderate amount of periosteal callous formation.

The left hind limb presents moderate to severe muscle atrophy.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Multiple pelvic fractures with bilateral sacroiliac joint involvement and narrow pelvic diameter.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals multiple chronic traumatic osseous injury of the pelvis with bilateral sacroiliac joint involvement and narrow pelvic diameter.

Moderate to severe atrophy of the left hind limb musculature is noted and may be neurogenic as well as secondary to disuse.

Trauma to the nerves of the lumbosacral plexus is a potential owing to the bilateral sacroiliac joint involvement. The fracture of the left iliac body is immediately caudal to the sacroiliac joint and reveals severe ventral and medial displacement. The iliac body now is ventral and medial of the position of the sacroiliac joint.



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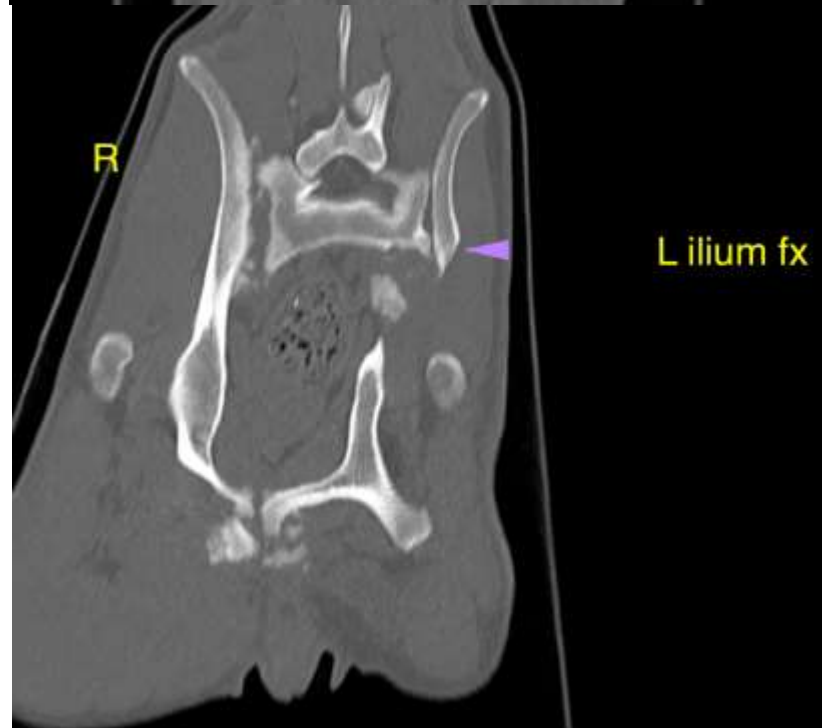
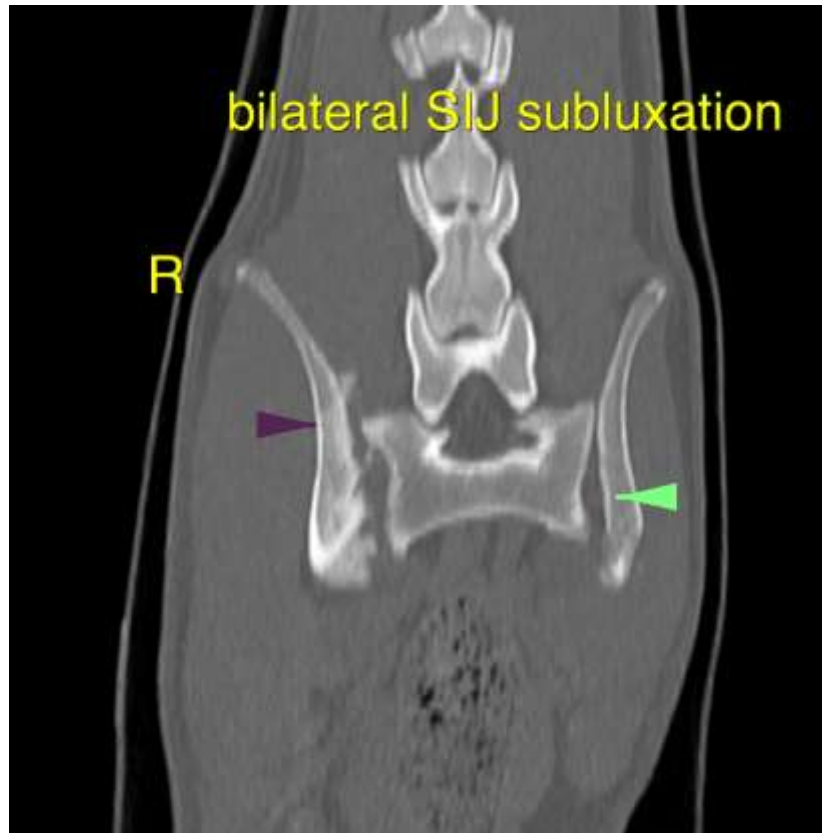
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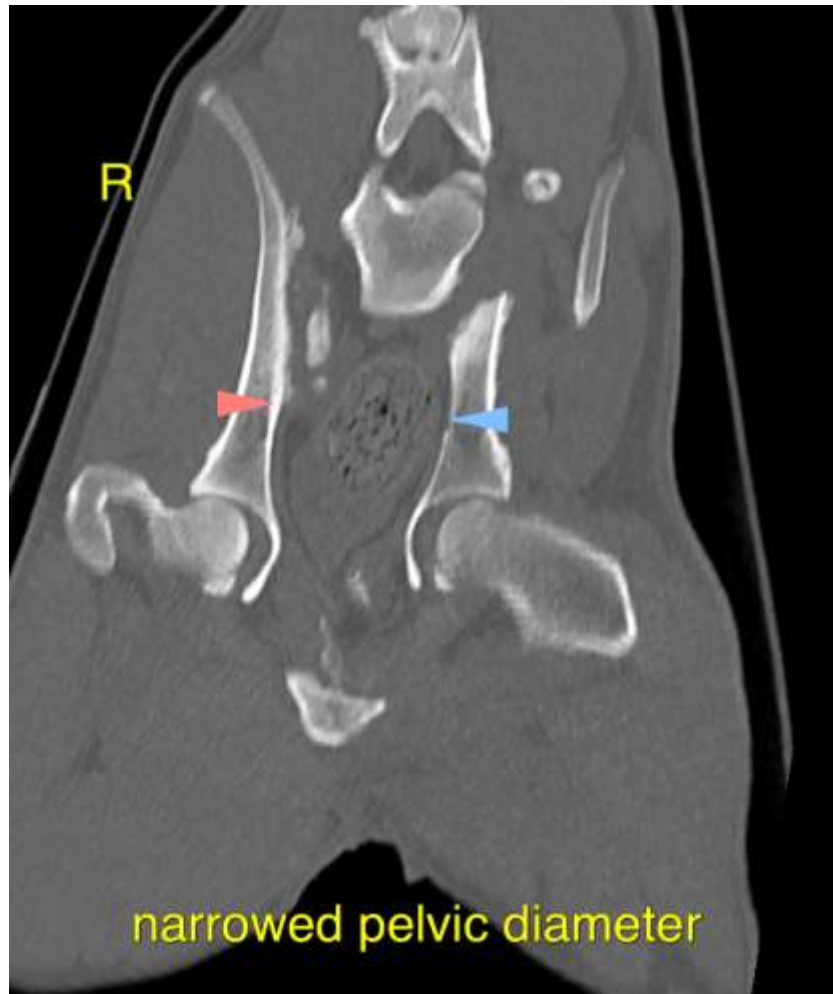
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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