



PATIENT

Frankie Reed

SPECIES

Canine

BREED

Rat Terrier X

SEX

Male Neutered

AGE

12M

WEIGHT

33lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Sam Doverspike

HOSPITAL NAME

Franklin Animal Clinic
Inc.

REFERRING VET

Sam Doverspike

INVOICE

73312

DATE

1-13-26

PRESENTING CLINICAL SIGNS

Tentatively Dx'd w' ACL of the right stifle

Abnormal PE/Chem/CBC/UA Results: Minimal drawer elicited on sedated palpation Minimal joint effusion present Hip Rads appear normal for age

ULTRASONOGRAPHIC FINDINGS

Right Stifle

Moderate anechoic effusion is present in the supra- and infra-patellar recesses of the right stifle joint. Marked synovial thickening is noted consistent with synovitis. Mild periarticular bone remodeling is present compatible with early degenerative change.

The visible portions of the cranial cruciate ligament demonstrate partial fiber discontinuity with hyperechoic appearance and surrounding hypoechoic halo.

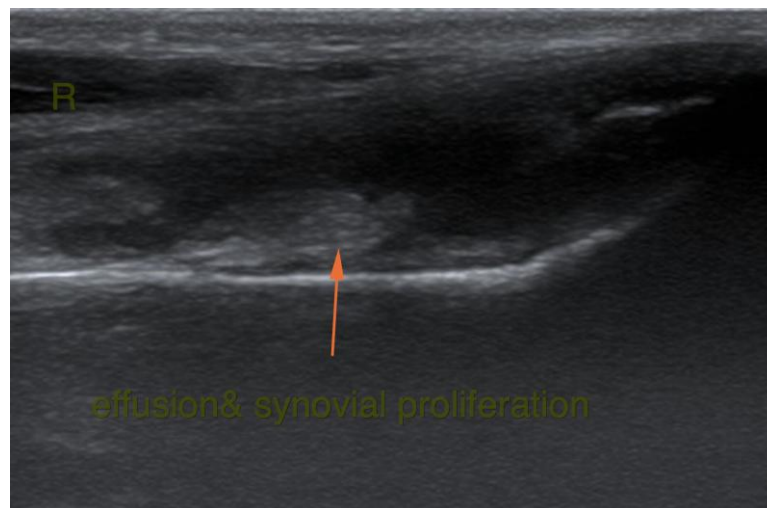
The assessable portions of the medial meniscus appear within normal ultrasonographic limits.

ULTRASONOGRAPHIC DIAGNOSIS

- Ultrasonographic findings strongly suggesting partial cranial cruciate ligament rupture of the right stifle joint.
- Moderate synovitis and joint effusion of the right stifle joint.
- Early degenerative changes of the right stifle joint.
- No ultrasonographic evidence of meniscal injury.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The ultrasonographic findings are highly supportive of a partial rupture of the right cranial cruciate ligament. Clinical findings appear to be consistent with partial rather than complete ligament failure. The early osseous remodeling suggests presence of instability and/or inflammation. Partial cruciate ligament injury may progress to complete rupture over time. Consider orthopedic consultation to discuss surgical management if not performed already.





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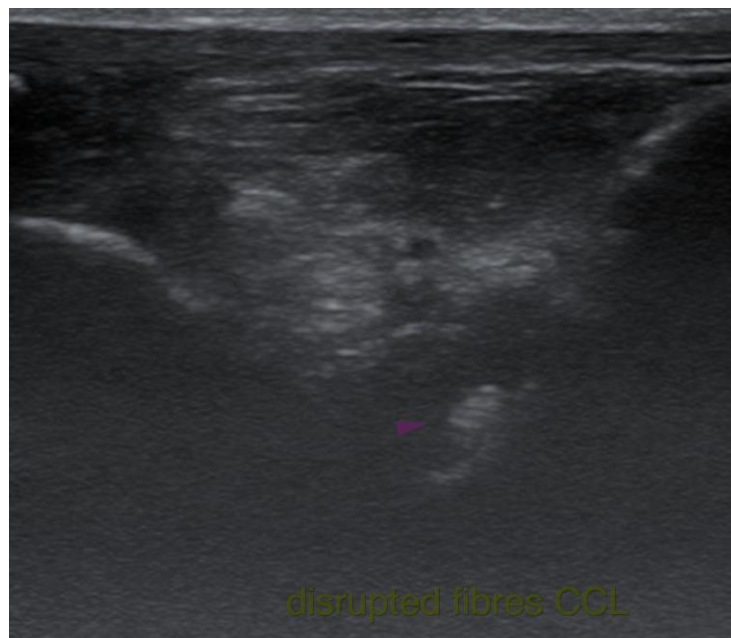
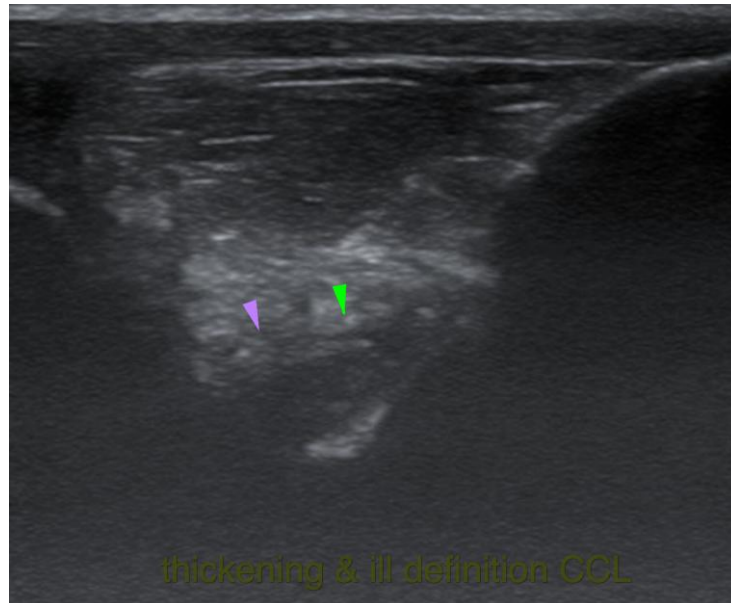
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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