



**PATIENT**

Rylie Graves

**PRESENTING CLINICAL SIGNS**

Intermittent limping right forelimb since 9/2021 radiographs taken in October and repeated in January 2022. Both sets of images sent to radiologist for consult (see attached) and also had our mobile surgeon look at them while here for another procedure. Rx: Carprofen 75mg PO BID prn

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC STUDY OF THE SHOULDERS, ELBOWS, & CARPI**

Plain and post contrast studies of the shoulders and post contrast studies of the elbows and carpi available for review.

**BREED**

Labrador Retriever

**COMPUTED TOMOGRAPHIC FINDINGS**

**Shoulders**

Mild intertubercular groove exostosis is seen in the right shoulder.

**SEX**

FS

The bilateral cervical lymph nodes and sternal lymph nodes present mild lymphadenomegaly.

**AGE**

3 Years

**Elbows**

A 3.5mm sized rounded fragment is seen medial of the medial humeral epicondyle in the right elbow. Mild swelling of the flexor tendon origin is noted.

The medial coronoid process contour is rounded in both elbows. There is mild heterogeneity of the bone pattern within the tip of the medial coronoid processes and mild bilateral radioulnar incisure incongruity.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

Minimal secondary osteoarthritic changes are present in the right elbow.

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CFL

**Carpi**

Both carpi present within normal limits. No evidence of abnormal soft tissue swelling, or osseous injury is seen.

The metacarpophalangeal joints present within normal limits in both front limbs as well.

**REFERRING VET**

Borecky

Moderate atrophy of the right front limb musculature is noted.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

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- Osseous signs of potential chronic right biceps tenosynovitis.
- Ununited medial humeral epicondyle and flexor enthesopathy of the right elbow.
- Mild deformity and heterogeneity of both medial coronoid processes.
- Minimal right elbow osteoarthritis.
- Structurally normal carpi and metacarpi.
- Cervical and sternal lymphadenomegaly.
- Disuse atrophy of the right thoracic limb musculature.

**DATE**

1-18-22



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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

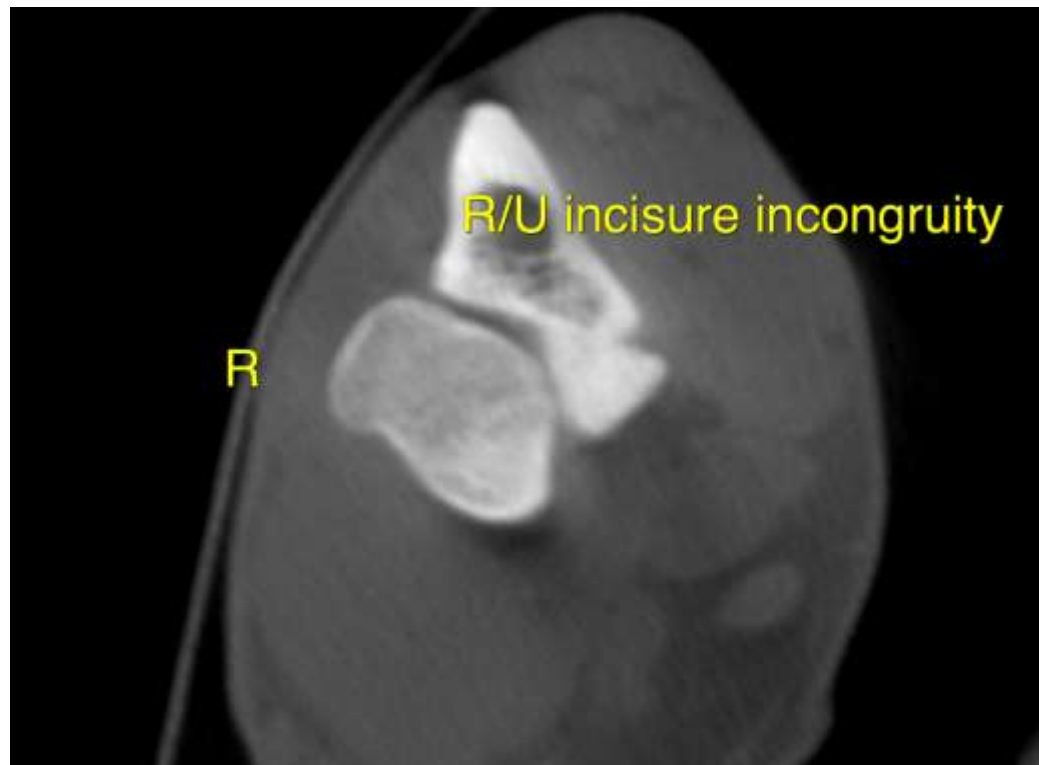
The CT study reveals indirect evidence of right biceps tenosynovitis. Shoulder ultrasound or MRI could be considered in order to further investigate for potential associated soft tissue changes in the biceps tendon and tendon sheath as well as within the rotator cuff.

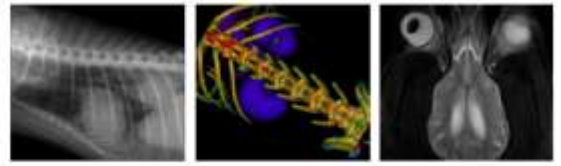
There also is evidence of flexor enthesopathy within the right elbow in association with an ununited medial humeral epicondyle.

The CT presentation of the medial coronoid processes reveals slight deviations from the expected anatomy in both elbows; however, no definitive fissure or fragmentation is seen. Presence of osteomalacia cannot be ruled out entirely even though not considered likely based on the CT findings.

No evidence of structural pathology was found in the carpal region.

Differential diagnosis for the lymphadenomegaly includes reactive hyperplasia versus early neoplastic infiltrate. Fine needle aspiration is recommended for further definition.





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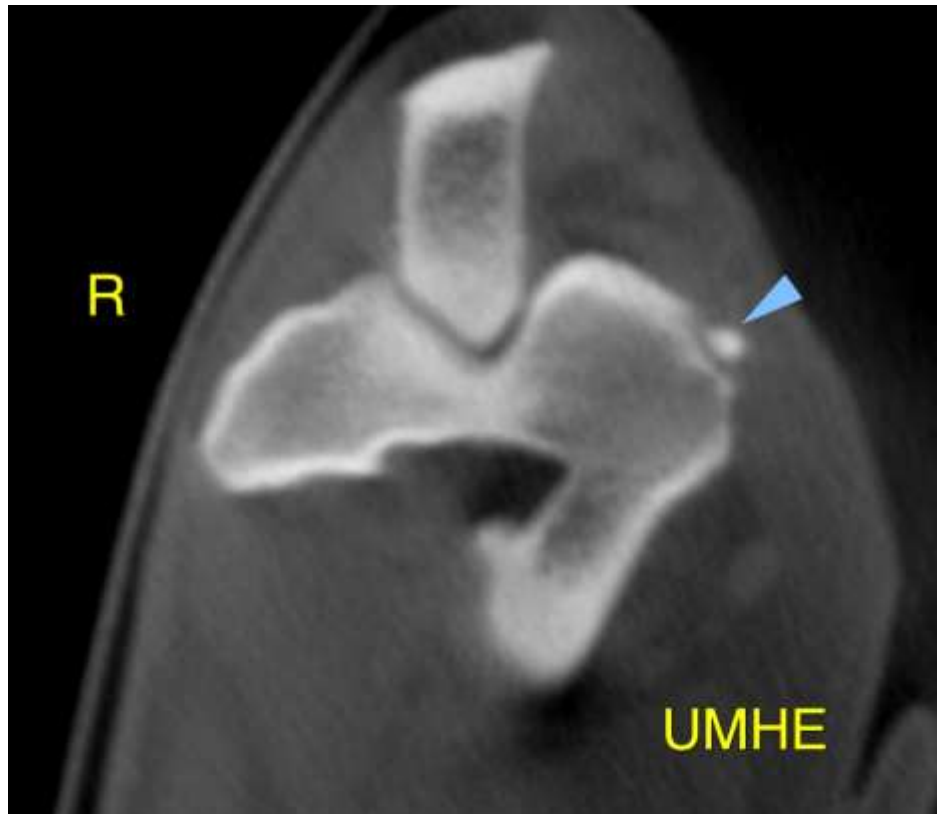
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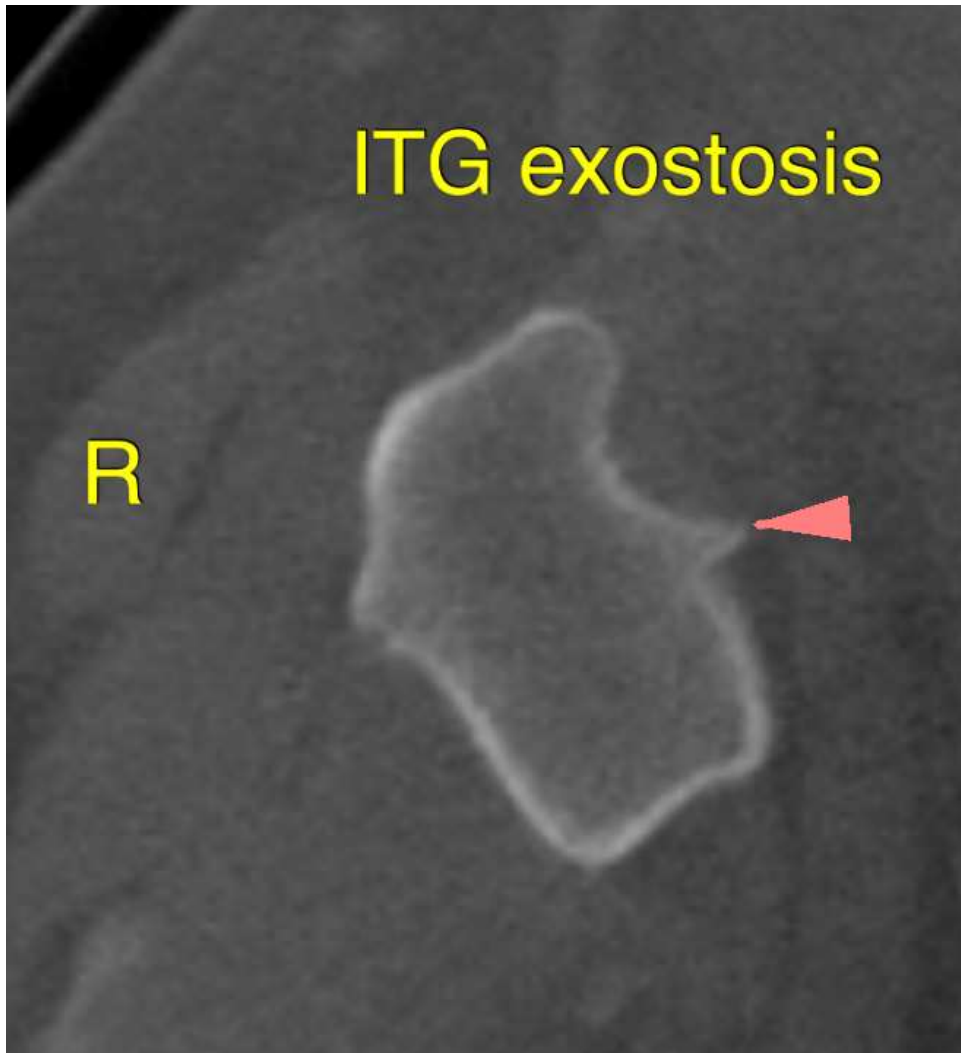
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**ITG exostosis**

**R**



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Borecky

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.

**INVOICE**

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