



PATIENT

Bella Labelle

SPECIES

Canine

BREED

Cockapoo

SEX

FS

AGE

12Y

WEIGHT

7.27kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Trudeau

HOSPITAL NAME

Vetcetera Animal
Hospital

REFERRING VET

Dr Trudeau

INVOICE

73482

DATE

1-27-26

PRESENTING CLINICAL SIGNS

last Thurs jumped off the bed and suddenly became non weight bearing on the LH leg; positive cranial drawer and tibial thrust; rotational movement as well; also a medially luxating patella; recently Dx with Cushings disease and on trilostane with the dose just being adjusted; prior hepatitis Dx; difficulty imaging the medial meniscus

Abnormal PE/Chem/CBC/UA Results: CBC - NSF Chem - elevated liver enzymes (on going); mild elevation in ALB/TP and BUN; corrected Ca level (normal); otherwise NSF

ULTRASONOGRAPHIC FINDINGS

Left Stifle

Joint effusion is present within the femoral tibial joint. Mild periarticular new bone formation is noted consistent with chronic degenerative change.

The cranial cruciate ligament shows disruption of fiber architecture at the distal attachment. Portions of the ligament appear irregular and hypoechoic with loss of normal fiber pattern. There may be some residual continuous fibers visible suggesting incomplete rupture rather than complete in disruption.

The visible portion of the medial meniscus appears normal in position with preserved echogenicity and contour.

ULTRASONOGRAPHIC DIAGNOSIS

- Cranial cruciate ligament injury and osteoarthritic changes of the left stifle.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The combination of ultrasonographic findings strongly supports clinically significant cranial cruciate ligament disease. Partial rupture is considered likely. However, the residual intact fibers are unlikely to be of sufficient biomechanical function, and the chronic stress and instability are associated with osteoarthritis. Presence of concomitant patella instability should be ruled out by means of clinical palpation. Orthopedic surgical consultation is recommended for stabilization of the stifle. Evidence of meniscal injury was not seen directly in the available images.



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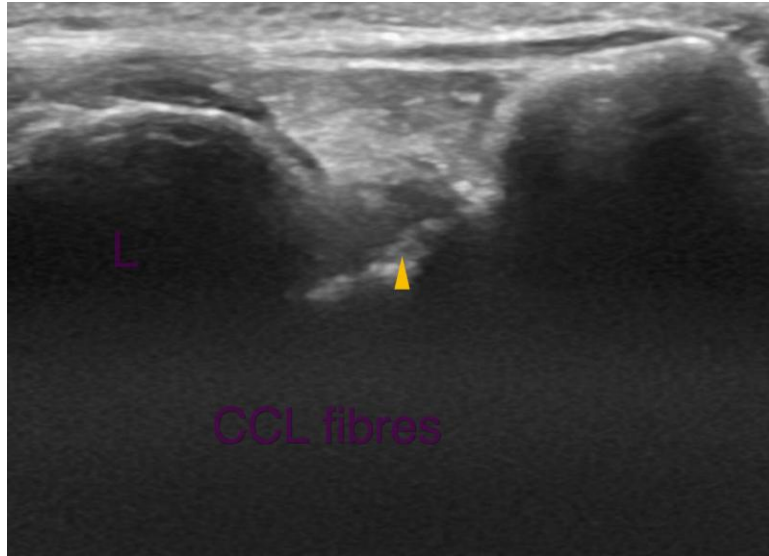
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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