

**PATIENT**

BonniBelle Brignone

PRESENTING CLINICAL SIGNS

Chronic, intermittent lameness RF. Wakes up from sleeping and is lame but then works out of it. NSAIDs do not seem to help with this.
Abnormal PE/Chem/CBC/UA Results: Crepitus, mild, bilateral elbows. Rest WNL.

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE ELBOWS

Mediolateral and craniocaudal views of the left and right elbow totaling 5 images available for review.

BREED

WHWT

RADIOGRAPHIC FINDINGSRight Elbow**SEX**

FS

Decreased opacity and cranial contour blurring of the medial coronoid process is seen. There is moderate subtrochlear notch sclerosis of the ulnar and moderate periarticular bone remodeling in the right elbow.

Left Elbow**AGE**

10 Years

Cranial contour blurring and decreased opacity of the medial coronoid process with subtrochlear notch sclerosis of the ulnar and a moderate amount of periarticular osteophytes is seen in the left elbow as well. There are well delineated new bone formations in the lateral and medial humeral epicondyles in the left elbow at the flexor and extensor tendon origin.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Degenerative changes are seen in the carpal region.

RADIOGRAPHIC DIAGNOSIS

- Bilateral elbow osteoarthritis with chronic flexor and extensor tendinitis in the left elbow.

HOSPITAL NAME

Pinebrook Animal
Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study reveals bilateral elbow osteoarthritis. The changes are more pronounced on the left when compared with the right side and combined with evidence of chronic flexor and extensor tendinitis in the left elbow. Coexisting pain and lameness from the carpal region should be ruled out in the right front limb.

REFERRING VET

Dr. Britt Dubil

INVOICE

47766

DATE

10-11-21



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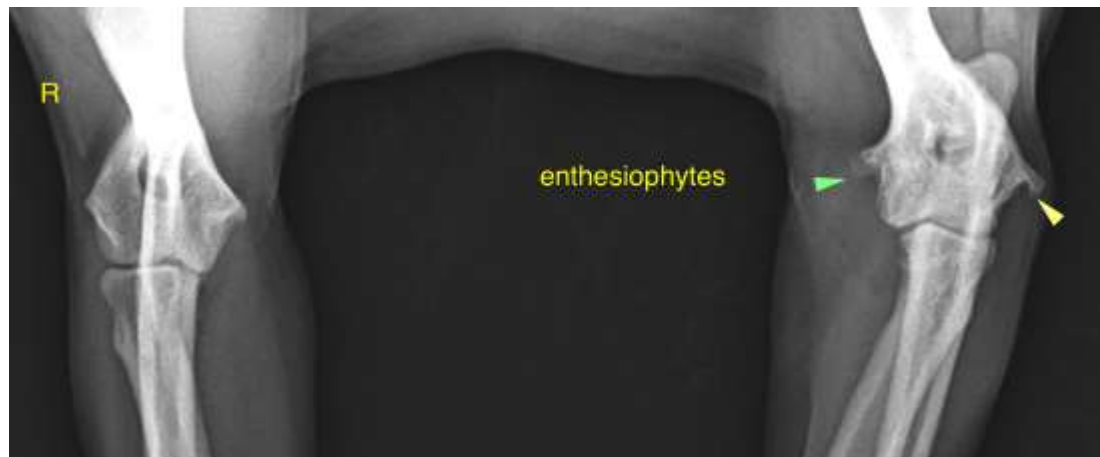
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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