SonoPath Teleradiology
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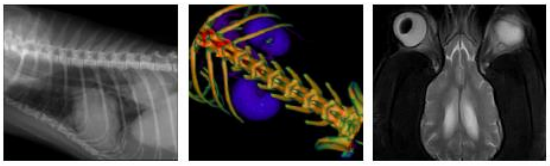

PATIENT

John Canadian Guide Dogs for the Blind

SPECIES

Canine

BREED

Labrador Retriever

SEX

Male

AGE

2 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Cedarview Animal Hospital

REFERRING VET

Kim Holzman

INVOICE

54715

DATE

10-19-22

PRESENTING CLINICAL SIGNS

Chronic forelimb lameness. No consistent findings on orthopedic exam. Forelimb rads showed Equivocal sclerosis of the intertubercular grooves, potentially indicative of chronic biceps tendinopathy,

ULTRASONOGRAPHIC FINDINGS

Left Shoulder

The supraspinatus, deltoideus and infraspinatus muscles present within normal limits for shape, volume, echoarchitecture and echogenicity. The transition to the supraspinatus tendon is even and thin. The broad part of the supraspinatus tendon presents within normal limits for its shape, volume and echogenicity. The maximum thickness of the supraspinatus tendon is 8mm on repeated measurements. There is no evidence of impingement. The attachment to the bone surface of the greater humeral tubercle is even and smooth. The infraspinatus muscle condenses and narrows down to a long tendon of even width, smooth outline and regular echogenic fibular echoarchitecture and up to the attachment to the bone surface of the humerus. There is no evidence of enlargement of the infraspinatus bursa.

The bicipital tendon sheath presents mild effusion and mild swelling of its synovium. Early exostosis is seen in the medial aspect of the intertubercular groove of the biceps tendon. The biceps tendon presents no evidence of internal echoarchitectural changes, and the tendon is smoothly delineated.

The visible margins of the shoulder joint are within normal limits.

The teres minor muscle and tendon present within normal limits.

Right Shoulder

The supraspinatus, deltoideus and infraspinatus muscles present within normal limits for shape, volume, echoarchitecture and echogenicity. The transition to the supraspinatus tendon is even and thin. The broad part of the supraspinatus tendon presents within normal limits for its shape, volume and echogenicity. The maximum thickness of the supraspinatus tendon is 8mm on repeated measurements. There is no evidence of impingement. The attachment to the bone surface of the greater humeral tubercle is even and smooth. The infraspinatus muscle condenses and narrows down to a long tendon of even width, smooth outline and regular echogenic fibular echoarchitecture and up to the attachment to the bone surface of the humerus. There is no evidence of enlargement of the infraspinatus bursa.

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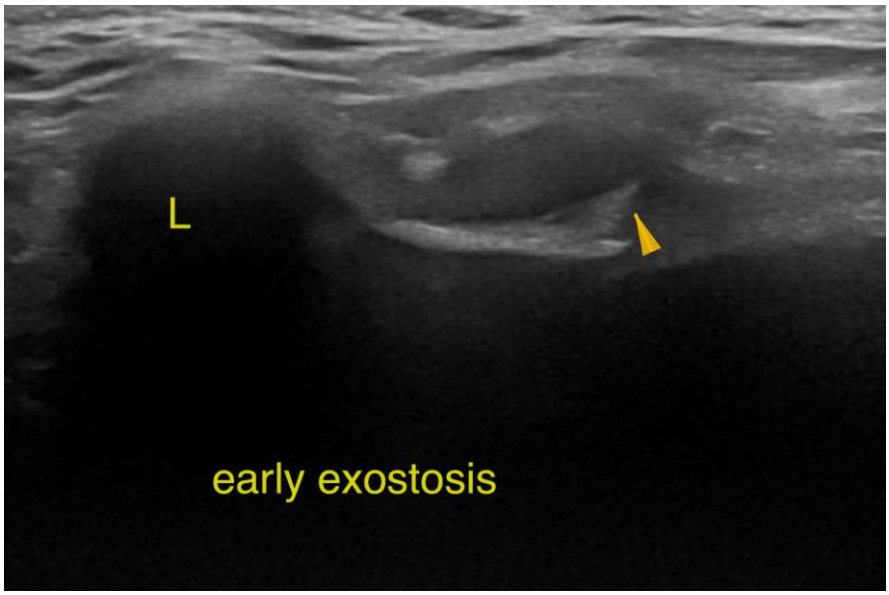
ULTRASONOGRAPHIC DIAGNOSIS

- Mild bilateral chronic biceps tenosynovitis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The ultrasonographic findings are compatible with mild bilateral (grade 1) biceps tenosynovitis. The findings are mild and should be responsive to conservative management such as rest, targeted physical therapy, systemic NSAID administration. Depending on the severity of the clinical signs, prp injections and therapeutic ultrasound (ultrasound shockwaves or laser) treatment could be considered.



The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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, DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
Nele.Eley@sonopath.com