



PATIENT

Stella Bell

PRESENTING CLINICAL SIGNS

Lameness RF leg since mid September; improved with meloxicam but mild lameness still evident
 Abnormal PE/Chem/CBC/UA Results: Pain in R shoulder extension and abduction, external rotation, medial shoulder, spasms in teres minor and supraspinatus. Radiographs of elbow and shoulder do not reveal any abnormalities

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

Left & Right Shoulder

BREED

Standard Poodle

The supraspinatus tendons present within normal limits in both shoulders. Maximum thickness of the supraspinatus tendons in 7mm. The attachment to the greater humeral tubercle is even and smooth. There is no evidence of biceps impingement.

SEX

Female

The biceps present no evidence of echoarchitectural changes within the tendon; however, a moderate amount of anechoic effusion and mild synovial swelling are seen in the bicipital tendon sheath in both shoulders.

The infraspinatus and teres minor present within normal limits.

AGE

8 Months

Both glenohumeral ligaments present within normal limits as far as seen.

ULTRASONOGRAPHIC DIAGNOSIS

- Bilateral shoulder and biceps tendon sheath effusion in both shoulders.

INTERPRETED BY

Nele Eley, DVM
 Dr. med. Vet. DipECVDI

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The effusion within the tendon sheaths of the biceps is likely to represent translocated effusion from the joint based on the clinical history. Rotator cuff weakness/shoulder hyperlaxity without structural injury is one potential underlying cause of the effusion and mild synovialitis. No macromorphological injury of the rotator cuff can be identified and the biceps tendons present no echoarchitectural changes.

HOSPITAL NAME

Cedarview Animal
 Hospital

REFERRING VET

Nigel Gumley

INVOICE

47878

DATE

10-20-21



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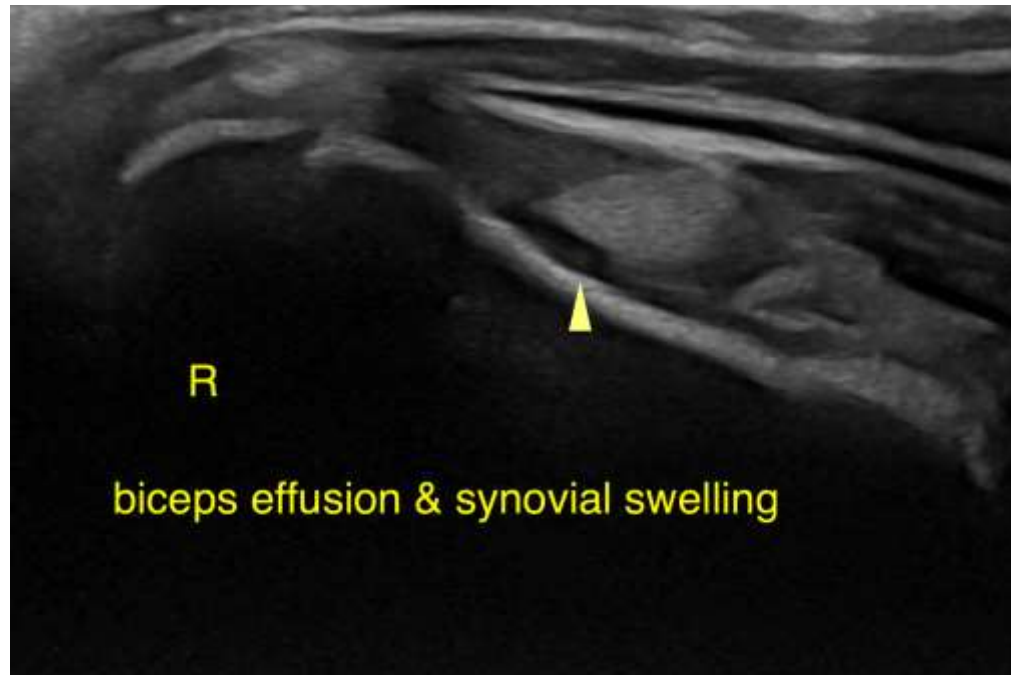
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biceps effusion & synovial swelling

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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