

**PATIENT**

Clancy Hathon

PRESENTING CLINICAL SIGNS

Intermittent lameness LF which has been present for about 1 year but resolves with rest. Now lameness has been persistent for about 2.5 weeks. Patient is on Meloxicam daily, which has helped some. No other meds currently.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Decreased range of motion on front left elbow flexion with mild pain response. Labs WNL, performed 1/7/21

BREED

Golden Retriever

RADIOGRAPHIC STUDY OF THE LEFT SHOULDER & LEFT ELBOW

Mediolateral view of the left shoulder and mediolateral and craniocaudal views of the left elbow totaling 3 images available for review.

RADIOGRAPHIC FINDINGS**SEX**

Male

Left Elbow

Decreased opacity and cranial contour blurring of the left medial coronoid process are seen. There is deep subtrochlear notch sclerosis of the ulnar. Mild radioulnar step formation is seen. There is a large amount of periarticular osteophytes and flexor as well as extensor enthesophytes at the lateral and medial humeral epicondyles. Flattening and subchondral bone sclerosis of the medial humeral condyle appears to be present in the orthogonal view.

AGE

9

Mild smooth new bone formation of the right elbow is seen in the craniocaudal view where the right elbow is included.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Left Shoulder

The radiographic presentation of the left shoulder is within age related normal limits.

HOSPITAL NAME

Sierra Pet Clinic

RADIOGRAPHIC DIAGNOSIS

- Medial coronoid pathology with severe secondary osteoarthritis and medial compartment syndrome/kissing lesion of the medial humeral epicondyle as well as flexor and extensor enthesopathy.

REFERRING VET

A. Garcia,
DVM

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study reveals severe osteoarthritis of the left elbow secondary to medial coronoid pathology with presumed medial compartment syndrome and chronic flexor as well as extensor enthesopathy.

INVOICE

47979

DATE

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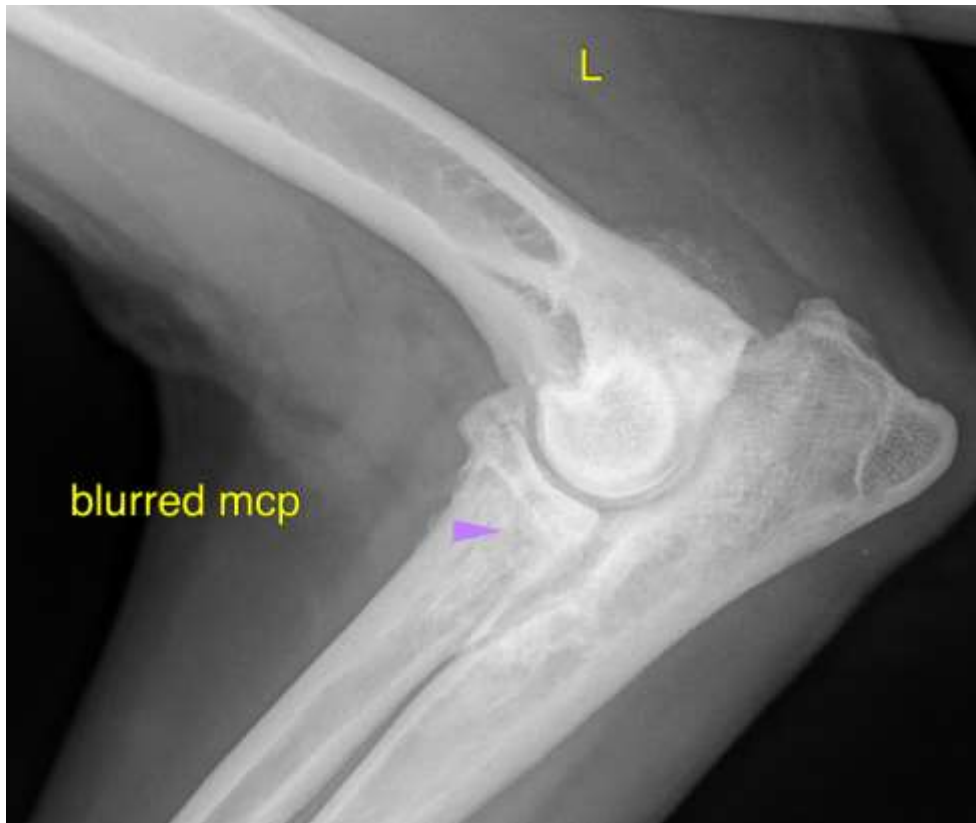
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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