



PATIENT

Albie Cady

PRESENTING CLINICAL SIGNS

Chronic lameness, all legs, since 2019, worse in forelegs. warms out of lameness. Abnormal PE/Chem/CBC/UA Results: LF lameness noted in clinic; not fully flexing stifles, slow hopping and CP, weak RH hamstrings. Mild loss of LF elbow flexion but no pain; suspect LS disease lateralizing to RH leg; radiographs show bilateral stifle OA and mild drawer in RH stifle.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

Left Shoulder

The left supraspinatus measures 9mm in thickness. Mild internal echoarchitectural remodeling of the left supraspinatus tendon is seen. There is no evidence of biceps impingement. Mild to moderate swelling of the bicipital synovium is noted as well as a moderate amount of anechoic effusion within the bicipital tendon sheath. A mild bony exostosis is seen in the intertubercular groove of the biceps tendon. There is no evidence of echoarchitectural changes of the biceps tendon itself. The infraspinatus and teres minor present within normal limits.

BREED

Golden Retriever

SEX

Male

Both the supra- and infra-spinatus muscles present mild generalized volume loss with mildly increased echogenicity.

AGE

10 Years

Right Shoulder

The right supraspinatus measures 9mm in thickness. Mild internal echoarchitectural remodeling of the right supraspinatus tendon is seen. There is no evidence of biceps impingement. Mild synovial swelling and mild anechoic effusion are noted within the bicipital tendon sheath with no evidence of echoarchitectural changes of the biceps tendon itself and no evidence of intertubercular groove exostosis.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Both the supra- and infra-spinatus muscles present mild generalized volume loss with mildly increased echogenicity.

HOSPITAL NAME

Cedarview Animal
Hospital

Left Stifle

A mild amount of effusion is noted within the supra- and infra- patellar recesses of the left stifle joint. There is a mild amount of periarticular osteophytes seen.

REFERRING VET

Nigel Gumley

The cranial cruciate ligament presents well delineated and continuous however it appears to be thickened with no evidence of fiber disruption.

The lateral and medial menisci present in situ, smoothly delineated, and with uniform internal echoarchitecture.

INVOICE

54466

Right Stifle

A mild amount of effusion is noted within the supra- and infra- patellar recesses of the right stifle joint. There is a mild amount of periarticular osteophytes seen.

DATE

10-5-22



PATIENT

Albie Cady

The cranial cruciate ligament is incompletely seen. Visible parts present slightly irregular outline and heterogeneous internal echoarchitecture however the ligament appears to be continuous.

The lateral and medial menisci present in situ, smoothly delineated, and with uniform internal echoarchitecture.

SPECIES

Canine

ULTRASONOGRAPHIC DIAGNOSIS

- Mild to moderate left chronic biceps tenosynovitis.
- Mild right biceps tenosynovitis
- Mild bilateral supraspinatus tendinopathy - unlikely to be of clinical significance.
- Bilateral stifle arthropathy with mild synovialitis, effusion, and osteophytosis.
- Suspect edema of the left cranial cruciate ligament.
- Suspect early partial rupture of the right cranial cruciate ligament.
- Echoarchitectural changes of both supra- and infra-spinatus muscles suggesting atrophy with fatty replacement in both shoulders.

BREED

Golden Retriever

SEX

Male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The ultrasonographic study reveals mild to moderate chronic biceps tenosynovitis in the left shoulder. A milder degree of biceps tenosynovitis is seen in the right shoulder as well.

AGE

10 Years

There is bilateral stifle osteoarthritis with minor changes of the left cranial cruciate ligament suggesting edema rather than fiber disruption. The assessment of the right cranial cruciate ligament is incomplete however the changes do suggest potential for partial rupture of the right cranial cruciate ligament. No evidence of meniscopathy was seen in either of the stifle joints.

INTERPRETED BY

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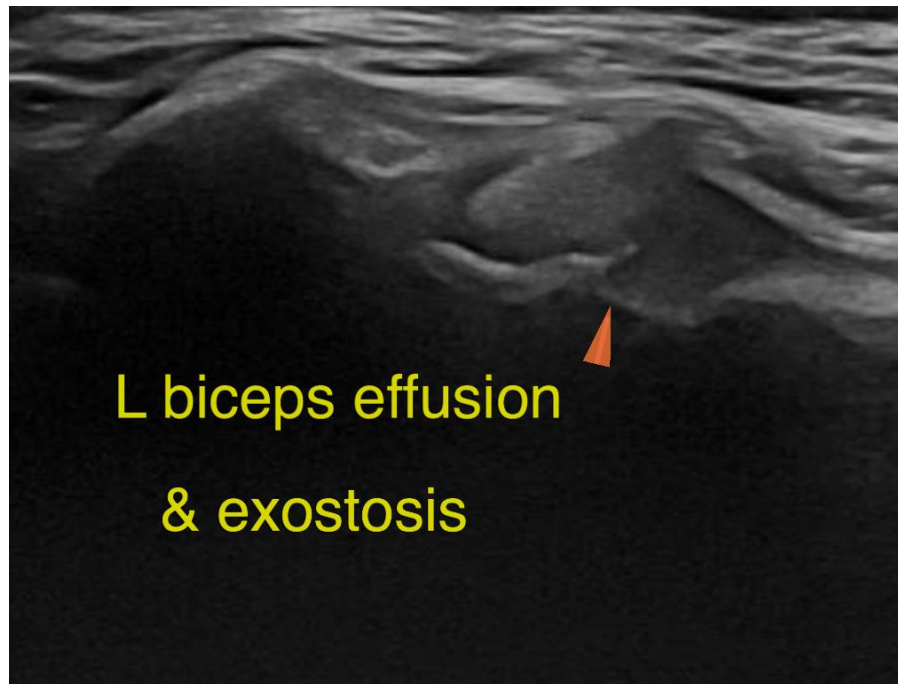
Nigel Gumley

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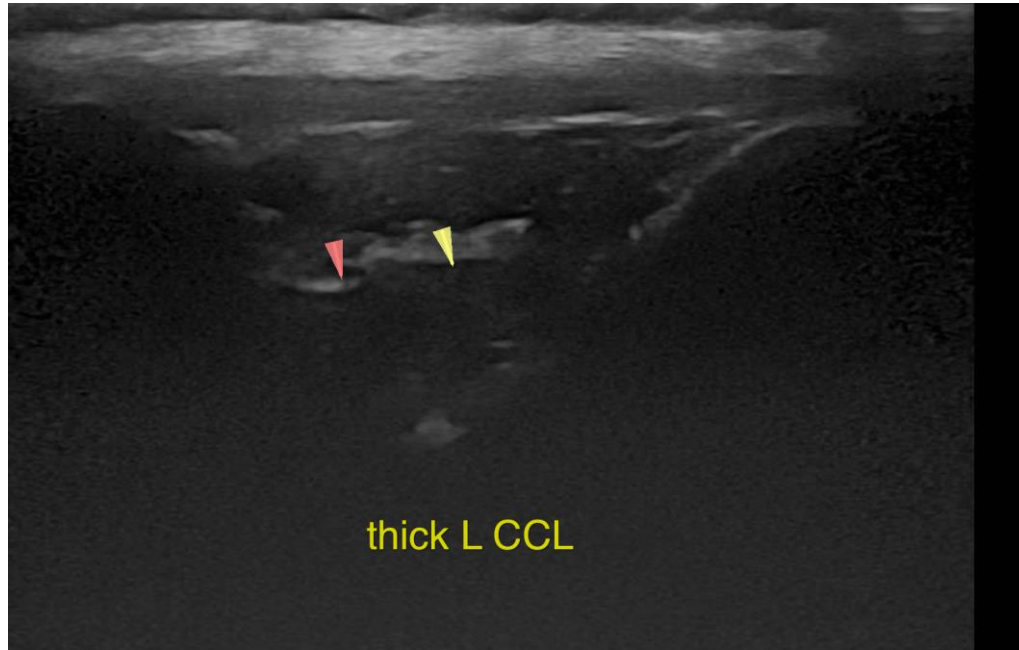
Nigel Gumley

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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.

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