



PATIENT PRESENTING CLINICAL SIGNS

Wade Stiles Examine Pelvis and stifles. Pins in leg were placed there when he was 8 weeks old. Attempted to take them out in 2012 and found necrotic looking bone - so did not take to avoid breaking the leg. Has coping well with orthopedic issues until last night- Last night appeared painful - would not eat, reluctant to walk. Resting heart/resp rates were 200/36 (very high for him). Gave Cerenia and buprenorphine (hasn't had either of these for at least 3 weeks) - still would not eat, but by morning seemed more comfortable. Walking in clinic showed a significant limp (normally has an abnormal gait, but this is very strange for him). *Today on exam seems painful on caudal lumbar/ L-S pressure Currently on Gabapentin, Cartrophen, Omega supplements and Flovent (asthma).

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

12 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Lomsnes Veterinary
Hospital

REFERRING VET

Dr. Hayley
Biederbeck

INVOICE

48182

DATE

11-2-21

RADIOGRAPHIC STUDY OF THE PELVIS

Lateral and ventrodorsal views of the pelvis totaling 3 images available for review.

RADIOGRAPHIC FINDINGS

The pelvic bones present within normal limits.

The coxofemoral joints present within normal limits.

Malunion fracture of the left distal femur is seen with 2 pins which appear to have migrated distally. A radiolucent halo is seen around the pins. The distomedial pin bridges the medial aspect of the femoral tibial joint space. Both the lateral and ventral aspect of the femoral tibial joint space are narrow.

Severe subchondral bone sclerosis, periarticular new bone formation, and reduced muscle volume of the left hind limb are seen.

The right stifle joint presents mild to moderate osteoarthritic changes.

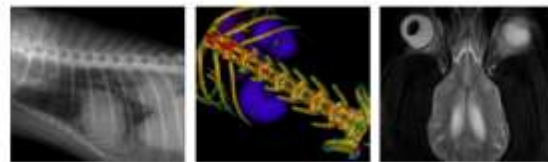
The sacrum comprises 2 vertebrae. There is a sacrocaudal transitional vertebra. No evidence of aggressive osteolytic lesions is seen in the sacrum and lumbar spine. The “radiolucent” area in the sacrum represents summation artifact with gas in the rectum of the patient.

There is an asymmetric thoracolumbar transitional vertebra with a right sided vestigial rib.

Early spondylosis deformans is present between the thoracolumbar transitional vertebra and the 1st lumbar vertebra as well as L5 and L6.

Central abdominal mineralization is seen.

The radiographic presentation of the lung is within age related normal limits. A mild generalized bronchial pattern is seen.



PATIENT

Wade Stiles

RADIOGRAPHIC DIAGNOSIS

- Left distal femoral malunion fracture with stifle arthrodesis, implant loosening, and implant migration.
- No evidence of aggressive osteolytic lesions within the spine.
- Mineralizing structure within the central abdomen - bates body versus intestinal content.
- Mild to moderate right stifle osteoarthritis.

SPECIES

Feline

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

BREED

There is no evidence of aggressive osteolytic lesions throughout the lumbar spine and sacrum.

DSH

The most significant changes appear to be associated with the left hind limb where implant migration and arthrodesis of the left stifle are present accompanied by disuse atrophy of the left hind limb musculature.

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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.

DATE

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