



PATIENT

Honey Gamily

PRESENTING CLINICAL SIGNS

Stifle US RPL lameness x 3 weeks
 Abnormal PE/Chem/CBC/UA Results: Effusion + drawer + RPL stifle NWB 80% of the time
 Suspect meniscal tear RPL

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

Right Stifle

BREED

Pit x

A moderate amount of periarticular osteophytes are seen in the femoral patella and femoral tibial joints. There is moderate swelling of the synovium and a moderate amount of anechoic effusion within the supra- and infra- patellar recesses of the right stifle joint.

SEX

FS

The cranial cruciate ligament is mostly discontinuous with disrupted fibers however a thin string of continuous fibers appears to be maintained and is surrounded by a hypoechoic halo.

The caudal horn of the medial meniscus is ill-defined and superimposed by a large amount of osteophytes as well as extensive thickening of the medial collateral ligament.

AGE

11 Years

Left Stifle

Minimal effusion with no evidence of significant synovial swelling and early periarticular bone remodeling are seen.

INTERPRETED BY

Nele Eley, DVM
 Dr. med. Vet. DipECVDI

The cranial cruciate ligament is continuous.

The medial meniscus is in situ, well delineated, and of uniform internal echoarchitecture.

ULTRASONOGRAPHIC DIAGNOSIS

- Right stifle osteoarthritis with cranial cruciate ligament pathology and suspect meniscopathy.
- Minimal effusion and early degenerative joint disease of the left stifle joint.

HOSPITAL NAME

Animal Care Center of
 Castle Pines

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The ultrasonographic findings support the clinical suspicion of cruciate ligament injury and potential meniscopathy in the right stifle joint. The pattern of meniscal tearing cannot be clearly delineated however the ultrasonographic findings do suggest meniscal degeneration at minimum if not meniscal rupture.

REFERRING VET

Bartling

INVOICE

55383

DATE

11-23-22



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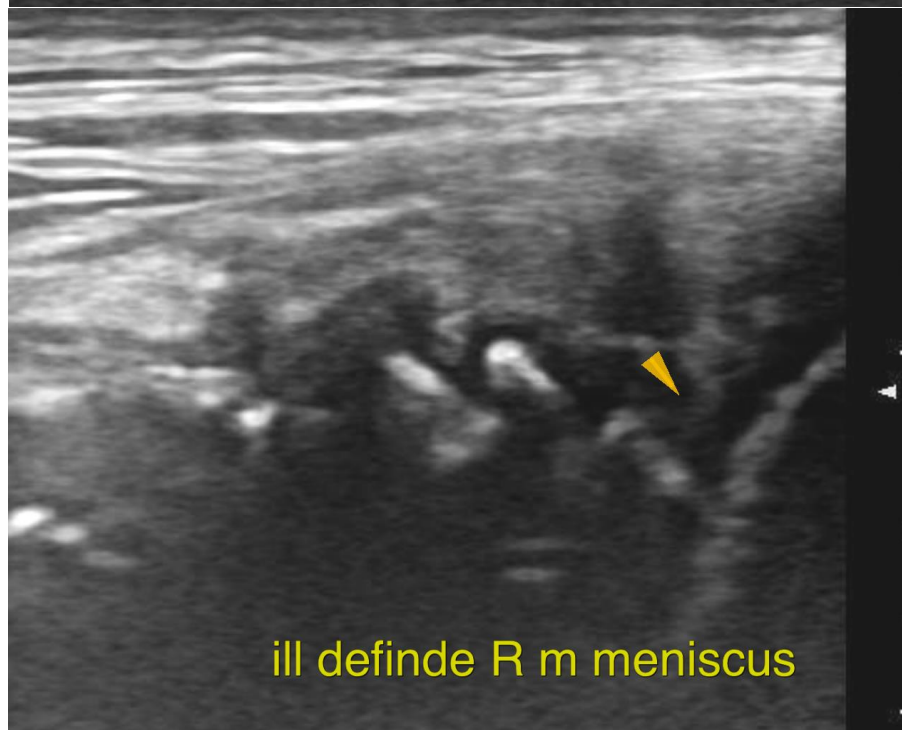
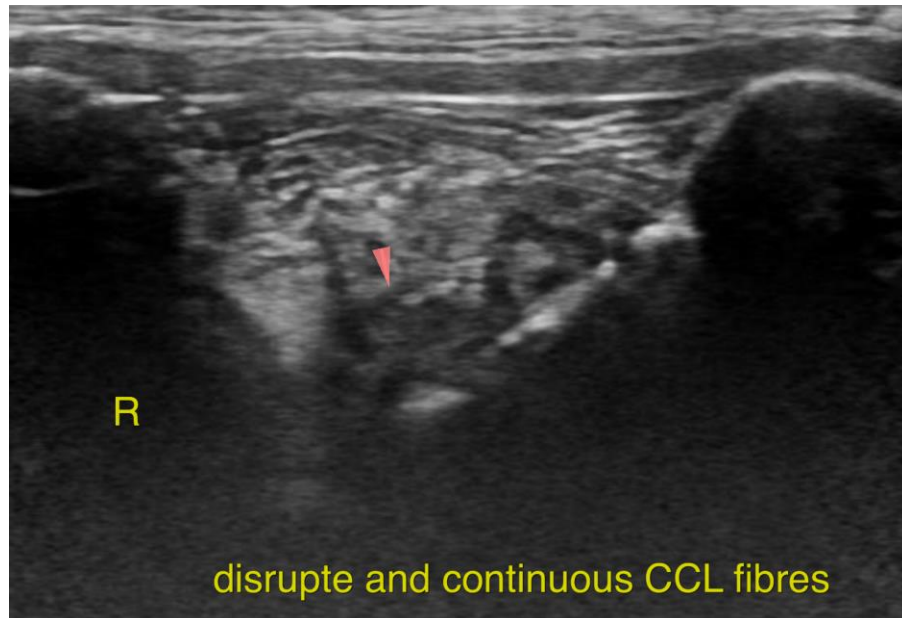
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

SPECIES

Canine

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