



## PATIENT

Parker Martin

## SPECIES

Canine

## BREED

Bulldog

## SEX

M

## AGE

1Y, 6M

## WEIGHT

24.6kg

## INTERPRETED BY

Nele Eley (Ondreka),  
DVM Dr. med. vet.,  
DipECVDI

## IMAGING PERFORMED BY

Dr Brian Barnes

## HOSPITAL NAME

Westview Veterinary  
Hospital

## REFERRING VET

Dr Brian Barnes

## INVOICE

72783

## DATE

11-27-25

## PRESENTING CLINICAL SIGNS

Limping for about 8 days, Slight decreased muscle mass over the right scapula

Abnormal PE/Chem/CBC/UA Results: 1. Unremarkable right and left forelimb. 2. Unilateral hip dysplasia. Laterality cannot be determined. 3. Suspect bilateral lateral patella luxation. 4. Bilateral stifle effusion could be compatible with an intra-articular injury such as a partial/complete cruciate ligament rupture and/or meniscal damage. 5. Unremarkable right and left tarsus. 6. Unremarkable thorax. 7. Unremarkable abdomen. 8. Multiple thoracic vertebral anomalies. These are typically incidental findings, but periodically can become unstable resulting in micromotion, spinal cord trauma and pain/neurologic deficits. 9. Possible disc disease at T13-L2. CBC and Chem WNL,

## ULTRASONOGRAPHIC FINDINGS

### Right Shoulder

Mild increased thickness of the bicipital synovium is seen. The synovial margins are smooth. There is mild anechoic effusion within the biceps tendon sheath. The tendon itself is smoothly delineated with maintained pennant fiber pattern and uniform echogenicity.

The broad part of the supraspinatus tendon presents within normal limits for its shape, volume and echogenicity. The attachment to the bone surface of the greater humeral tubercle is even and smooth. The infraspinatus muscle condenses and narrows down to a long tendon of even width, smooth outline and regular echogenic fibular echoarchitecture and up to the attachment to the bone surface of the humerus. There is no evidence of enlargement of the infraspinatus bursa.

The visible margins of the shoulder joint are within normal limits.

## ULTRASONOGRAPHIC DIAGNOSIS

- Mild right biceps tenosynovitis.
- No evidence of supraspinatus tendinopathy or infraspinatus tendinopathy.

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The findings support mild inflammatory changes of the right biceps tendon sheath which may contribute to the right forelimb lameness. However, the extent of changes is mild and unlikely to explain moderate to severe lameness. The relatively mild inflammatory changes of the biceps tendon sheath are expected to respond to exercise restriction and systemic NSAID treatment. Lameness of other origin remains a possibility.



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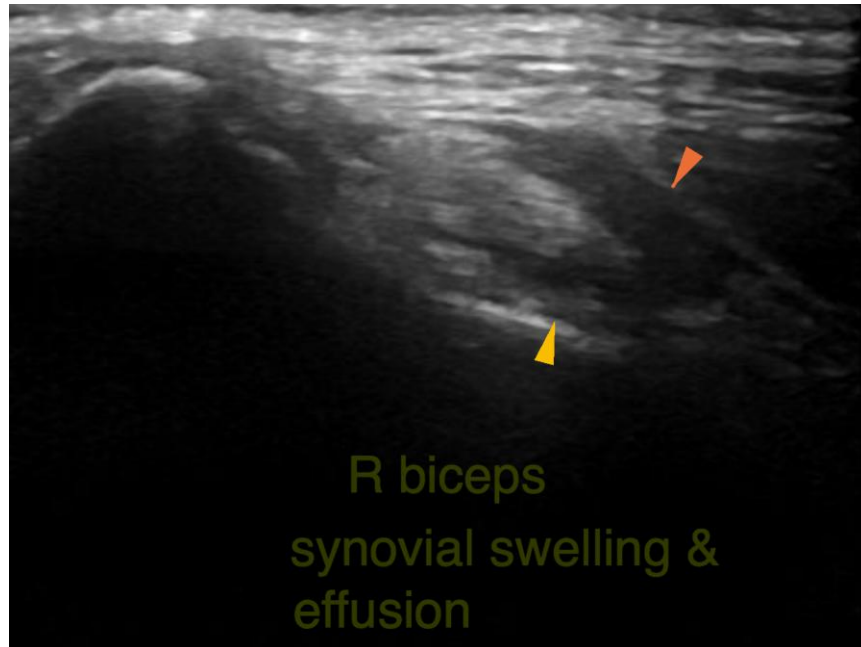
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Nele Eley (Ondreka)**, DVM, Dr. med. vet., DipECVDI  
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