



PATIENT

Juno Gumley

PRESENTING CLINICAL SIGNS

Lameness to RF leg since mid-October intermittently. Worse with increased play activity. Has bilateral hip dysplasia and off-loads hind legs moderately.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Pain of flexion of the R carpus, no obvious effusion. Decreased carpal flexion. Normal radiographs including flexed carpal stress views. FCU normal palpation.

BREED

German Shepherd

ULTRASONOGRAPHIC FINDINGS

Right Carpus

Mild articular swelling and synovial swelling of the antebrachiocarpal and intercarpal joints is seen. The quality of the effusion is anechoic. Mild generalized thickening of the digital extensor tendon with mild anechoic fluid accumulation circumferential to the extensor tendon is seen. There is early osseous remodeling of the periarticular margins in the dorsal contour of the carpal bones.

SEX

FS

A signal dropout is seen in the area of the distal attachment of the right flexor carpi ulnaris tendon immediately proximal to the accessory carpal bone.

AGE

8 Years

ULTRASONOGRAPHIC DIAGNOSIS

- Mild chronic extensor tendinitis / tendinosis in the right carpus with early degenerative joint disease and mild right carpal synovitis and effusion.
- Signal dropout distal right flexor carpi ulnaris tendon.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The ultrasonographic findings support the presence of chronic extensor tendinitis/tendinosis in the right carpus which is concurred by mild synovitis and effusion as well as early degenerative joint disease.

HOSPITAL NAME

Cedarview Animal Hospital

The focal signal dropout in the flexor carpi ulnaris tendon is likely due to anisotropy artifact and less likely to represent an actual lesion. Correlation with the clinical palpation recommended.

REFERRING VET

Nigel Gumley

INVOICE

55432

DATE

11-29-22



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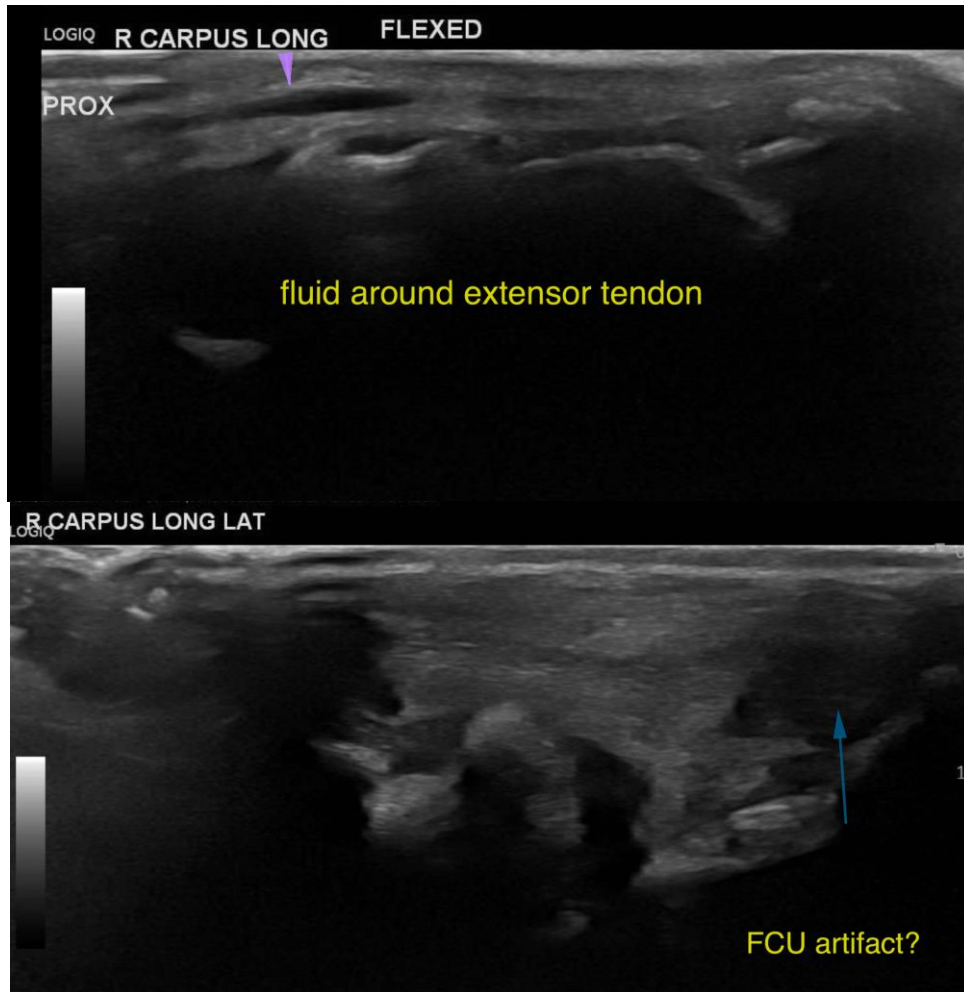
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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