



**PATIENT**

Wilbur Grantham

**PRESENTING CLINICAL SIGNS**

History of recurrent non-specific back pain. On today's assessment, bilateral iliopsoas pain was detected, but not on previous examinations. Lumbopelvic radiographs, including PennHIP were taken and no abnormalities were found. Two minor self resolving RFL lameness episodes have been observed. On examination, the right shoulder had pain on palpation of the subscapularis tendon, and increased laxity on palpation demonstrated by an increased external rotation of the caudal humeral head on hyperflexion, and 30 degree abduction angle (20 degrees on opposite side).

**SPECIES**

Canine

**BREED**

Border Collie

**ULTRASONOGRAPHIC FINDINGS**

**Right Shoulder**

6.5mm thickness of the supraspinatus is measured. No significant echoarchitectural remodeling is seen. There is no evidence of biceps impingement. The attachment of the tendon to the greater humeral tubercle is smooth. The biceps tendon presents mild swelling of its synovium and mildly increased anechoic effusion. Intertubercular groove bone surface is within normal limits.

**SEX**

M

**Left Shoulder**

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**AGE**

15 Months

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**Left & Right Iliopsoas**

Both iliopsoas muscles and coxofemoral joints present within normal limits.

The iliopsoas tendons are smoothly delineated and present a uniformly hyperechoic regular fiber pattern.

**HOSPITAL NAME**

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The musculotendinous junctions present within normal limits.

The visible coxofemoral joint margins are smoothly delineated and there is no evidence of synovial swelling or effusion of the coxofemoral joints.

**REFERRING VET**

David Lane

**ULTRASONOGRAPHIC DIAGNOSIS**

- Mild bilateral biceps tenosynovitis
- Normal ultrasonographic presentation of the right and left iliopsoas tendons.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The ultrasonographic study reveals mild bilateral biceps tendon sheath effusion with mild concurrent synovial swelling which may well represent translocated effusion or extension of other arthropathy. Primary biceps tenosynovitis is considered rather unlikely as the underlying cause of the noted ultrasonographic changes. The ultrasonographic study did not reveal evidence of iliopsoas muscle injury.

**DATE**

11-4-22



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**REFERRING VET**

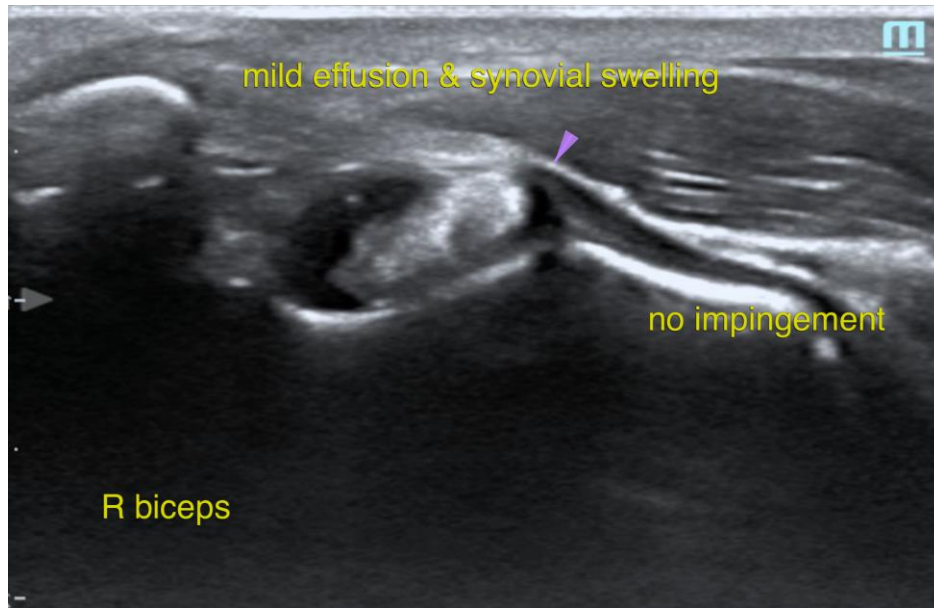
David Lane

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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.

**Nele Eley**, DVM, Dr. med. vet., DipECVDI  
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