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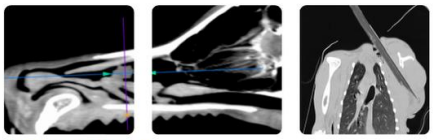
FOSTERING THE ART OF VETERINARY MEDICINE™



Teleradiology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Aspen Anderson

SPECIES

Canine

BREED

Labrador Retriever

SEX

FS

AGE

5yr

INTERPRETED BY

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

HOSPITAL NAME

Mountain West

REFERRING VET

Dr David Mason

INVOICE

23223

DATE

12/15/2025

PRESENTING CLINICAL SIGNS

Limping since July/August of this year. Is especially sore after hunting or training, other wise seems normal. Pain elicited from front shoulder.

COMPUTED TOMOGRAPHIC STUDY OF THE SHOULDERS

Plain and post contrast studies are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

LEFT

Within the region of the supraspinatus tendon, there are 4 discrete mineralized foci, each measuring between 3 and 5 mm in diameter. These mineralizations result in regional thickening and increased volume of the left supraspinatus tendon. The enlarged tendon margin is in close proximity to and impinges upon the course of the biceps brachii tendon within the intertubercular groove. The biceps tendon itself cannot be fully assessed for internal fiber architecture or tenosynovial effusion due to the inherent limitations of CT for soft tissue tendon evaluation. However, its anatomic relationship to the enlarged supraspinatus tendon strongly suggests mechanical impingement.

No subchondral bone defects are identified at the humeral head or glenoid. There is no evidence of osteophyte formation, enthesopathy or degenerative joint disease. No joint incongruity or intraarticular mineralized bodies are seen.

RIGHT

The right shoulder is within normal limits. The supraspinatus and biceps tendon regions show no abnormal realization or focal enlargement. There are no osseous abnormalities, subchondral defects or osteoarthritic changes.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Left supraspinatus tendinopathy with multifocal intratendinous mineralization.
- Suspect secondary biceps tendon impingement on the left.
- Normal CT presentation of the right shoulder comments.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The mineralized focal within the left supraspinatus tendon and the associated tendon enlargement are characteristic for chronic mineralizing supraspinatus tendinopathy. In this case, the increased tendon volume results in encroachment on the biceps tendon within the intertubercular groove making biceps tendon impingement a likely contributor to the patient's signs. While CT is well suited for detecting mineralization and osteoarthritis changes, it has limited sensitivity for evaluating tendon fiber disruption, synovitis or tenosynovial effusion.

Musculoskeletal ultrasound or MRI of the left shoulder could be considered to further assess the biceps tendon and its sheath for tenosynovitis, fiber disruption or effusion if surgery is contemplated, finding support addressing supraspinatus mineralization with consideration of

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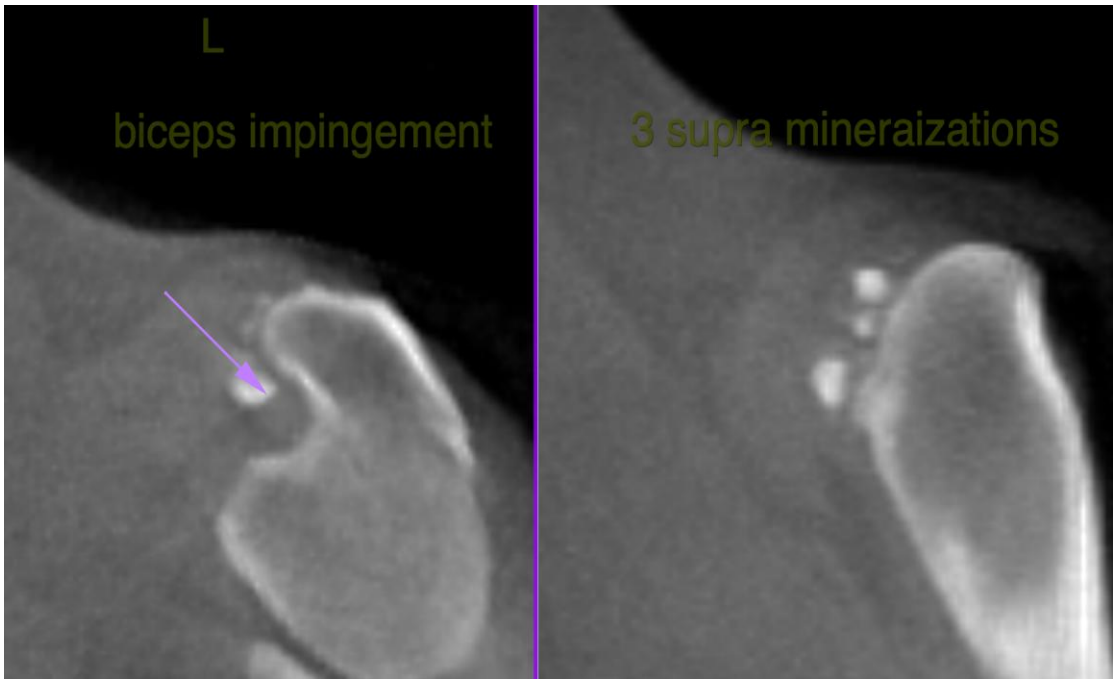
concurrent biceps impingement rather than an isolated primary biceps pathology alone.



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
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.
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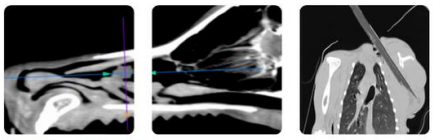

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