



**PATIENT**

Silvi COPE Service  
Dogs

**PRESENTING CLINICAL SIGNS**

Silvi presented for evaluation of elbow dysplasia. The elbow dysplasia was initially noticed in May 2021 during x-ray for screening. No clinical signs were observed. Normal E/DU/D; No V/S/C/D. Silvi is currently eating Royal Canin Large Breed Adult, with no history of allergies. Activity: 1 to 1.5 hour walk daily; sometimes off-leash Silvi is UTD on vaccines. Orthopedic CT Performed Dec 2nd 2021

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: Pain on Right side elbow upon exam

**COMPUTED TOMOGRAPHIC STUDY OF THE ELBOWS**

**BREED**

Labrador Retriever

Plain studies in soft tissue and bone reconstructions available for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

**SEX**

F

**Right Elbow**

A 5mm wide subchondral bone defect is seen within the medial humeral condyle. A partially mineralized in situ flap appears to be present. Deep peripheral subchondral bone sclerosis is seen. The medial coronoid process presents increased attenuation and contour irregularity; however, no fissure or fragment is present. There is a mild amount of periarticular osteophytes.

**AGE**

1 Year

**Left Elbow**

Very similar findings are present in the left elbow with a 5mm wide subchondral bone defect of the medial humeral condyle which is surrounded by peripheral sclerosis. Deformity and sclerosis of the medial coronoid are seen as well as a mild amount of periarticular osteophytes.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

Patchy medullary opacities are present within the medullary cavities of the radius and ulnar in both front limbs.

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**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Bilateral elbow dysplasia with osteochondritis of the medial humeral condyle and medial coronoid process deformity as well as mild secondary osteoarthritis of both elbows.
- Panosteitis eosinophilica.

**REFERRING VET**

Dr. Jeffery Biskup

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Bilateral medial humeral condyle osteochondritis is seen. The deformity of the medial coronoid process is likely a consequence of the osteochondritis which is considered the primary lesion here. However, concurrent medial coronoid pathology cannot be ruled out entirely. The secondary osteoarthritic changes are mild at this point. However, in presence of clinical signs, arthroscopic revision should be considered for both or the effected elbows/elbow.

**INVOICE**

48760

The panosteitis is a sterile inflammation of the medullary cavities of the long bones which is typically accompanied by shifting lameness and a disease of a growing dog that ceases with skeletal maturity and hence, is considered self-limiting. However, systemic NSAID

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12-2-21

administration, rest, and restriction of the daily caloric intake can help alleviate the clinical signs.



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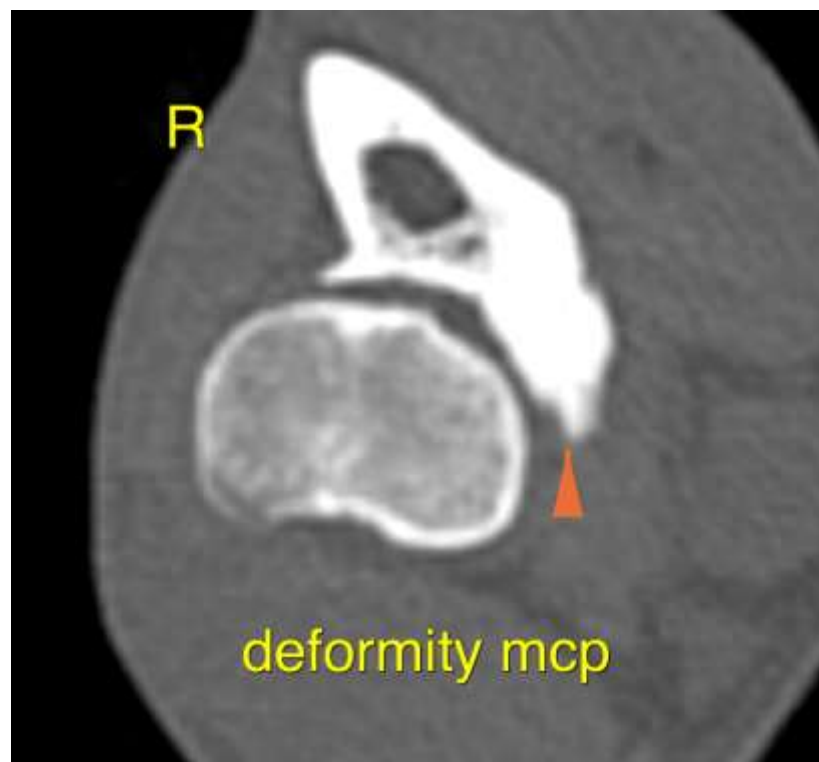
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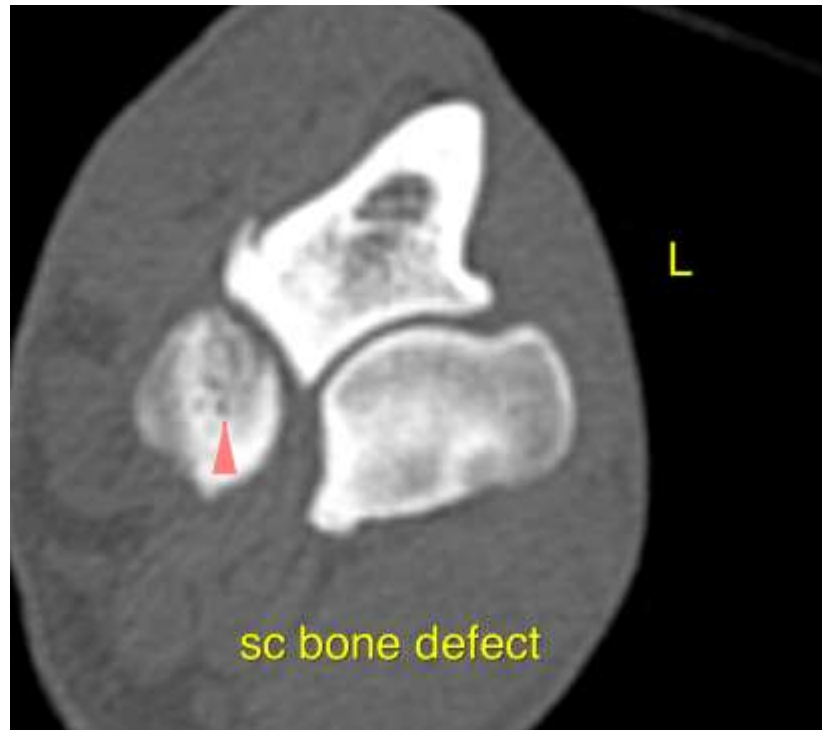
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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