



PATIENT

Eli Kustner

SPECIES

Canine

BREED

Labradoodle

SEX

MN

AGE

3Y, 6M

WEIGHT

47kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Janice

HOSPITAL NAME

Bridgwater Veterinary
Hospital and Wellness
Centre

REFERRING VET

Dr. Vicky Sempers

INVOICE

73079

DATE

12-22-25

PRESENTING CLINICAL SIGNS

Early August acute onset LF lameness. Dx OCD left elbow. NSAID, joint supplement & rest advised with lameness improving but still noticeable after heavy activity. Head bob, appears to walk with LF held quite stiffly, 1-2/10 lame at walk, slightly worse when circling. Palpation - reduced extension left hip. Reluctant to fully WB LF when lift RF. Left elbow OCD lesion present just below the level of the joint line visible on both lat & vd xrays. VD shows it is on the lateral aspect - suspect osteophyte changes that might indicate OA, surgeon feels the lesion near the radius is in the approximate location of the medial coronoid process.

Abnormal PE/Chem/CBC/UA Results: Slightly increased hemoglobin, slightly decreased platelet count.

COMPUTED TOMOGRAPHIC STUDY OF THE ELBOWS

Plain study of the right and left elbow is available for review. Image quality is good.

COMPUTED TOMOGRAPHIC FINDINGS

Left Elbow

The lateral and medial humeral condyle shows a smooth regular subchondral bone surface with normal mineral attenuation. No subchondral bone defects are identified within the medial or lateral humeral condyle.

The medial coronoid process is well delineated with normal shape, smooth margins, and uniform attenuation.

The radial head and trochlear notch are unremarkable.

No significant periarticular osteophyte formation or other CT evidence of osteoarthritis is detected.

The joint surfaces are congruent.

Right Elbow

The lateral and medial humeral condyle shows a smooth regular subchondral bone surface with normal mineral attenuation. No subchondral bone defects are identified within the medial or lateral humeral condyle.

The medial coronoid process is well delineated with normal shape, smooth margins, and uniform attenuation.

The radial head and trochlear notch are unremarkable.

No significant periarticular osteophyte formation or other CT evidence of osteoarthritis is detected.

The joint surfaces are congruent.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Normal CT presentation of both elbows with no CT evidence of medial coronoid disease, osteochondritis, or other developmental elbow pathology.
- No evidence of elbow osteoarthritis.



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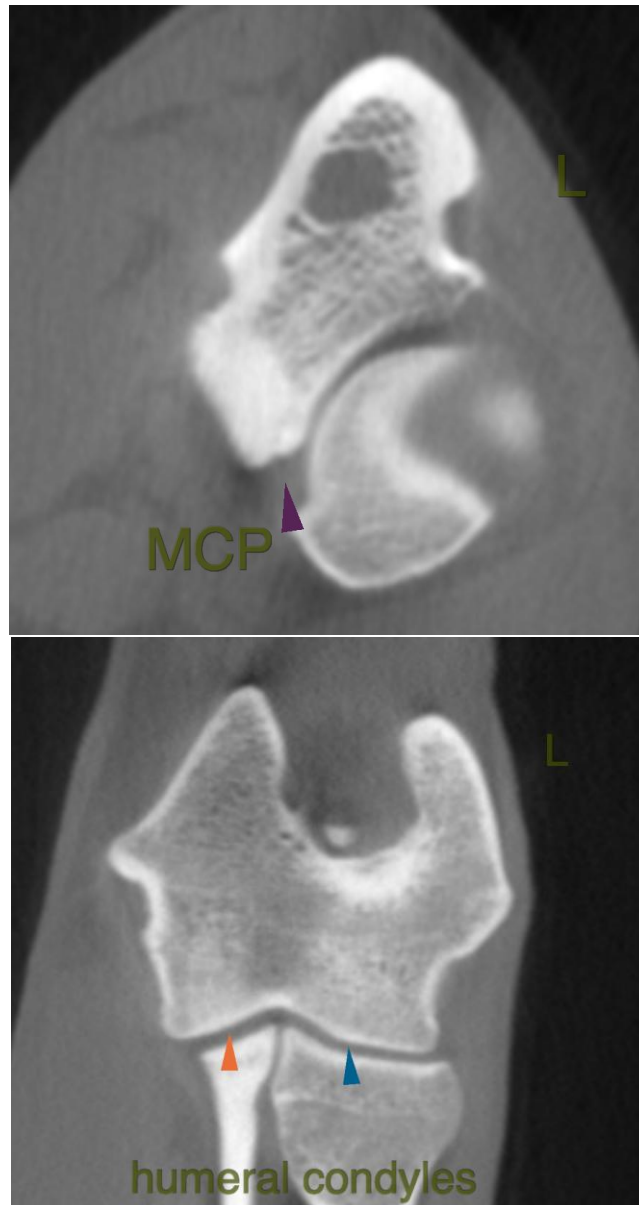
DATE

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INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The CT study does not detect evidence of medial coronoid disease or subchondral bone pathology including OCD. There are no structural abnormalities to support medial coronoid fragmentation, fissuring, or osteochondritis dissecans.

The previously described radiographic lesion of the left elbow is not corroborated on CT and may represent summation or positional artifact. Given the persistent but mild lameness, a non-osseous cause such as soft tissue trauma or inflammation, or lameness of other anatomic origin should be considered.





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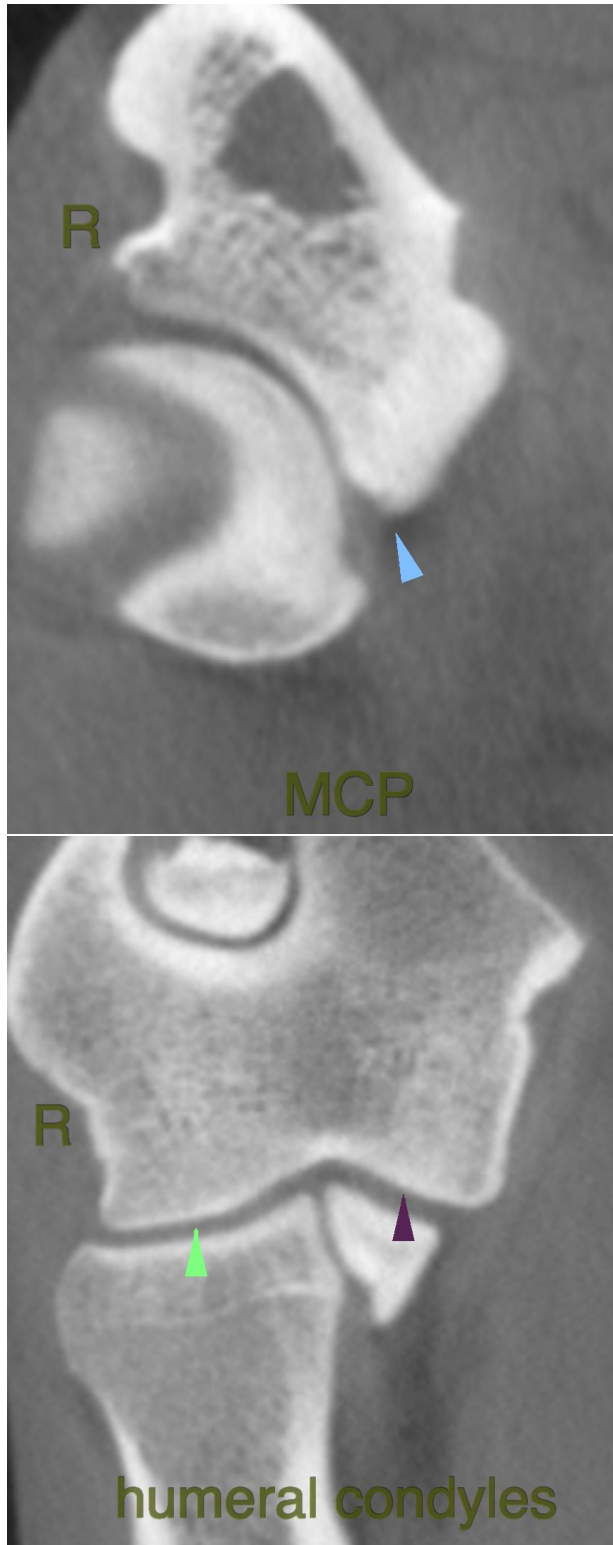
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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