



PATIENT

Rootez Telesky

SPECIES

Canine

BREED

Australian Shepherd

SEX

MN

AGE

4Y, 3M

WEIGHT

22.4kg

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. Samantha Goossen

INVOICE

73082

DATE

12-22-25

PRESENTING CLINICAL SIGNS

Intermittent lameness of left front leg.
Abnormal PE/Chem/CBC/UA Results: NAF

COMPUTED TOMOGRAPHIC STUDY OF THE ELBOWS

Plain study of the left and right elbow available for review.

COMPUTED TOMOGRAPHIC FINDINGS

Left Elbow

A 7 x 3mm sized, sclerotic fragment is separated from the tip of the left medial coronoid process. The medial coronoid process itself presents sclerosis. Moderate periarticular osteophytes are present. There is no evidence of subchondral bone defects.

Mild radioulnar incongruity is noted characterized by step formation between the radial head and ulna with a slightly longer ulna (approximately 1mm).

Right Elbow

No discrete fragmentation of the medial coronoid process is identified. However, the medial coronoid process shows deformity and heterogeneous attenuation. Mild periarticular osteophytes are present.

Mild radioulnar incongruity is noted characterized by step formation between the radial head and ulna with a slightly longer ulna (approximately 1mm).

No evidence of subchondral bone defects is noted.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Left medial coronoid disease with fragmentation and moderate secondary osteoarthritis.
- Right medial coronoid disease without fragmentation or fissuring and mild secondary osteoarthritis.
- Mild bilateral radioulnar incongruity.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The findings in the left elbow are consistent with chronic medial coronoid process disease with isolation of a large fragment. Radioulnar incongruity may have contributed to abnormal load distribution and progression of disease. Moderate secondary osteoarthritic changes are present.

The changes in the right elbow are milder and may be subclinical at this time. The medial coronoid process presents signs of osteomalacia; however, fragmentation is not noted at this point.

Consider arthroscopy of the left elbow for removal of the fragment.

The right elbow should be monitored clinically for presence of progression of clinical signs.



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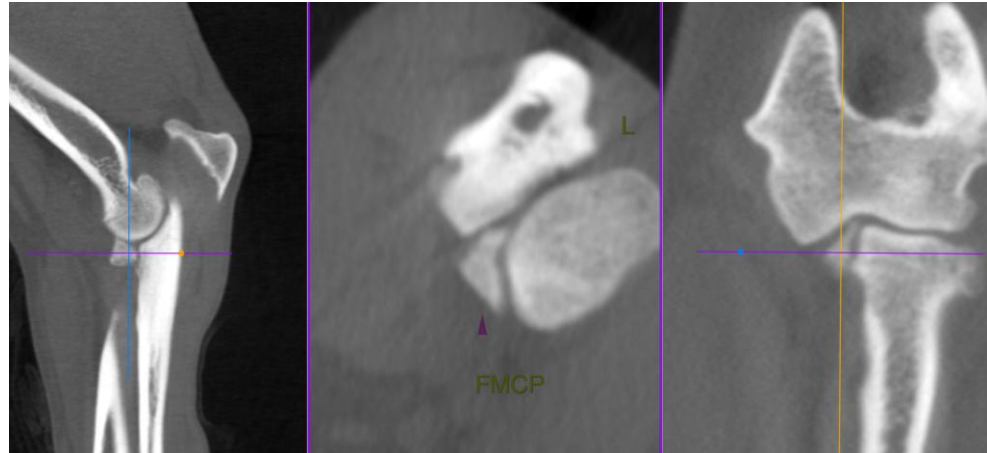
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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