



PATIENT PRESENTING CLINICAL SIGNS

Hudson Kramer Lameness left front leg on/off since September 2022. Limp with pain medication-will not use the leg if not taking pain medication. Primary vet started him on Prednisone, gabapentin & Glucosamine supplement. Patient is also on Apoquel and Thyro-L. At initial exam on December 3, 2022 patient was 2/6 lame left front with mild pain on peak flexion & extension of shoulder, moderate swelling of left shoulder joint

SPECIES

Canine

BREED

German Shorthair Pointer

Abnormal PE/Chem/CBC/UA Results: Radiographs on December 3, 2022: Left forelimb radiographs- moderate osteoarthritis of the left shoulder, osteophytosis fo the caudal glenoid fossa, new bone growth on the cranial aspect of the neck of the scapula, irregular bone margins on caudal neck of scapula and on lesser trochanter of the humerus. ALT & ALK have been elevated, at today's exam were mildly elevated. Hypothyroid just diagnosed in Oct/Nov this year.

COMPUTED TOMOGRAPHIC STUDY OF THE SHOULDERS

Plain and post contrast studies available for review.

SEX

MN

COMPUTED TOMOGRAPHIC FINDINGS

There appears to be mild atrophy of the left front limb musculature.

AGE

7.5 Years

Large semicircular new bone formation is seen in the intertubercular groove of the bicipital tendon in the proximal humerus of both front limbs. There is a large amount of periarticular osteophytes including the cranial and medial margin of the glenoid cavity as well as the margin of the humeral head which is seen bilaterally as well. There is moderate articular swelling with thickening of the synovium and a moderately increased amount of joint fluid.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

A small subchondral bone defect is seen in the caudal contour of the right humeral head.

No evidence of subchondral bone lesions is present in the left humeral head.

HOSPITAL NAME

Casselton Vet Service

The visible cervical spine presents within normal limits.

Mild bilaterally symmetric axillary lymphadenomegaly is noted.

COMPUTED TOMOGRAPHIC DIAGNOSIS

REFERRING VET

Dylan Boyer

- Severe bilateral shoulder osteoarthritis.
- Bilateral articular effusion and synovitis of the shoulder joints.
- Severe chronic biceps tenosynovitis.
- Mild bilateral axillary lymphadenomegaly.
- Atrophy of the left front limb musculature.
- Subchondral bone defect within the right humeral head suggesting chronic osteochondritis.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

12-27-22

Bilateral shoulder arthropathy with severe effusion, synovitis, and degenerative joint disease is seen. There is evidence of severe chronic biceps tenosynovitis. Concurrent or underlying medial shoulder instability syndrome is a potential consideration in this patient. The changes are fairly symmetric between the right and left side however clinical significance of the changes noted on CT are highly variable and the bilaterally symmetric appearance does not rule out unilateral



PATIENT

lameness.

Hudson Kramer

The lymph node changes are compatible with reactive lymphadenitis.

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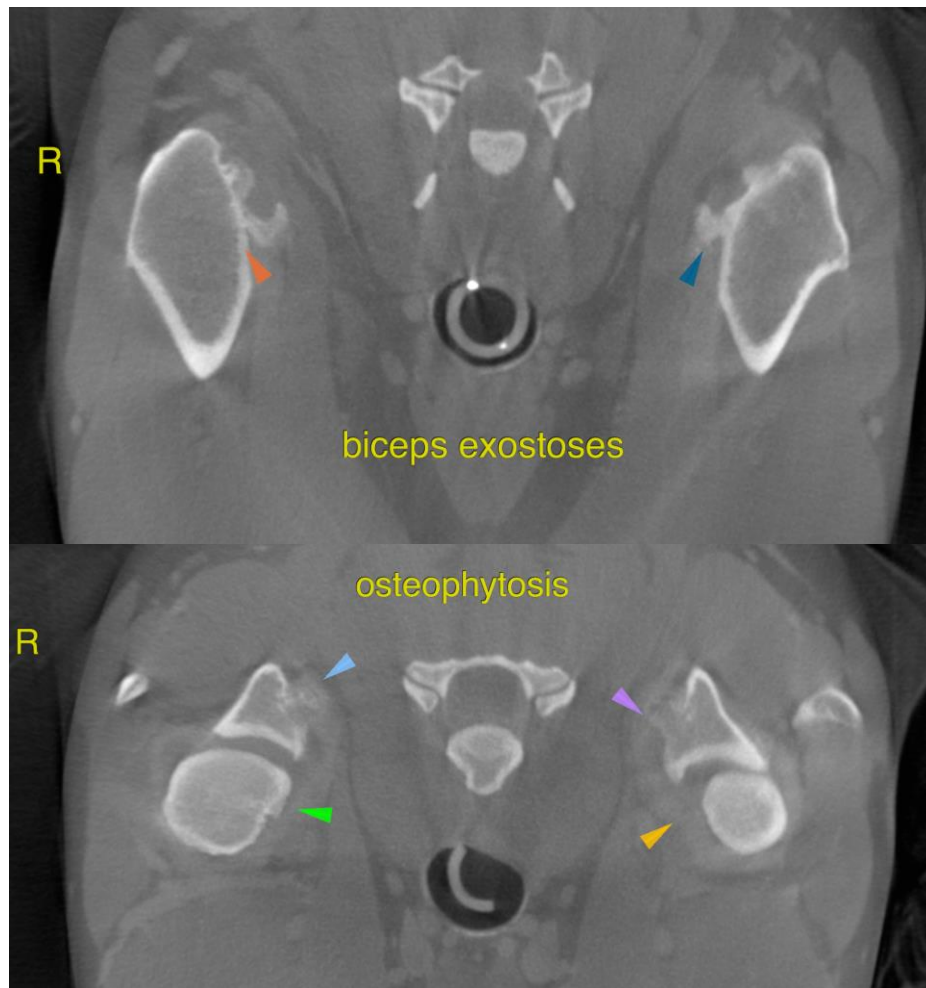
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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