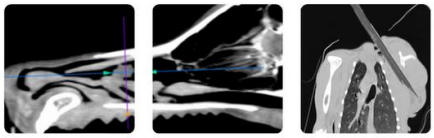

PATIENT

Romeo Millman

SPECIES

Canine

BREED

Labradoodle

SEX

MN

AGE

9Y

WEIGHT

n/a

INTERPRETED BY

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

IMAGING PERFORMED BY

Kerri Becker

HOSPITAL NAME

Marsh AH

REFERRING VET

Dr. Milwicki

INVOICE

73118

DATE

12-29-25

PRESENTING CLINICAL SIGNS

New patient to us, limping R hind for 1 month. Fevers, generally lethargic. Was treated with rimadyl and doxi, bld wk reveals elev. liver values. Is this due to rimadyl?? Denamarin, gaba, amotadine, cefpo
Abnormal PE/Chem/CBC/UA Results: Elev. neut. Decr- lymph.

ULTRASONOGRAPHIC STUDY OF THE BILATERAL TARSOCRURAL JOINTS

Longitudinal and transverse views obtained of the joint and deep digital flexor tendon available for review.

ULTRASONOGRAPHIC FINDINGS

Right Tarsocrural Joint

Anechoic joint effusion is present with mild to moderate synovial proliferation. Extensive soft tissue swelling is noted involving the right deep digital flexor tendon sheath which communicates with the tarsocrural joint. The synovial lining appears hypoechoic and moderately thickened. The pattern of thickening is even. No discrete mass is identified within the joint or tendon sheath's synovium. Tendon fibers are intact with no evidence of tearing. The tendon margins are smooth and surrounding soft tissues present mild swelling compatible with edema/inflammation.

Left Tarsocrural Joint

Mild joint effusion and mild thickening of the synovial lining are present. The deep digital flexor tendon appears normal.

ULTRASONOGRAPHIC DIAGNOSIS

- Right tarsocrural joint effusion with synovial proliferation.
- Extensive right deep digital flexor tendon synovial sheath swelling communicating with the tarsocrural joint consistent with tenosynovitis secondary to joint inflammation.
- Mild effusion of the left tarsocrural joint – likely reactive or early bilateral synovitis.
- No discrete mass or tendon rupture identified.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The ultrasound findings are consistent with right sided or bilateral inflammatory arthropathy and secondary tenosynovitis affecting the deep digital flexor tendon sheath. The communication between the tendon sheath and joint supports a synovial based inflammatory process which may be secondary to trauma, immune mediated, or infectious etiology.

Mild effusion of the contralateral joint may represent reactive changes or early subclinical involvement. Correlation with the available radiographic examination findings is recommended.

Aspiration and analysis of synovia should be considered especially given the systemic signs of fever and lethargy and corresponding hematologic abnormalities. Infectious or immune mediated polyarthritis should be considered.

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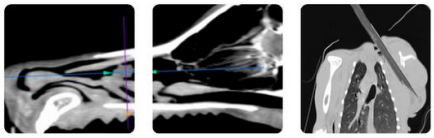

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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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