



PATIENT

Roo Nevell

SPECIES

Canine

BREED

Portugeuse Water Dog

SEX

MN

AGE

9Y, 9M

WEIGHT

59.4

INTERPRETED BY

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

IMAGING PERFORMED BY

Michele Pfannenstiel

HOSPITAL NAME

Mill Brook Animal
Clinic - VBF

REFERRING VET

Michele Pfannenstiel

INVOICE

73746

DATE

2-16-26

PRESENTING CLINICAL SIGNS

- Lameness (Lame RR) with pain on back, palpable click and + cr drawer on right, could not elicit on left. Started after a fall down the stairs at the end of Nov (Thanksgiving Day in the US)
- Gets GI distress from the pain

ULTRASONOGRAPHIC FINDINGS

Right Stifle

The ultrasonographic study reveals mild anechoic effusion within the supra- and infra-patellar recesses of the right stifle joint.

The cranial cruciate ligament is sonographically continuous with mild thickening and heterogeneous echogenicity consistent with edema or low grade partial injury. No discrete fiber disruption or complete tear is identified.

The visible parts of the medial and lateral menisci are normal in position, shape, and echogenicity.

The patella ligament and surrounding periarticular soft tissues present within normal limits.

No significant osteophytosis is seen.

Left Stifle

The left stifle presents no evidence of joint effusion.

The cranial cruciate ligament region appears normal.

The visible tissue of the medial and lateral meniscus is unremarkable.

The periarticular soft tissues and patella tendon present within normal limits.

No ultrasonographic abnormalities of the left stifle joint are noted at this time.

ULTRASONOGRAPHIC DIAGNOSIS

- Mild synovial effusion and altered echogenicity of the cranial cruciate ligament in the right stifle consistent with edema or low grade partial injury.
- Left stifle within normal limits.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The ultrasonographic appearance of the right cranial cruciate ligament suggests degenerative or partial injury rather than complete rupture. Continuity of the ligament appears to be maintained. Functional insufficiency can never be ruled out entirely, however, ligament rupture appears unlikely at this point. There is no ultrasonographic evidence of meniscal injury seen. Continuation of the conservative management can be considered if clinical improvement is observed. Reevaluation is recommended if lameness persists or worsens.



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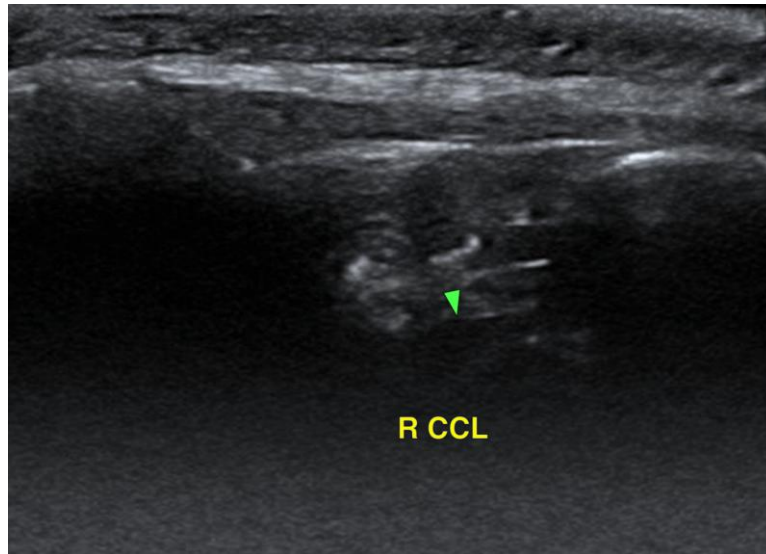
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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