



PATIENT

Hooch Potvin

SPECIES

Canine

BREED

Bull Mastiff

SEX

Neutered Male

AGE

6 Years 1 Month

WEIGHT

53

INTERPRETED BY

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

IMAGING PERFORMED BY

Clinic

HOSPITAL NAME

Green Dog Dental &
Wellness

REFERRING VET

Dr. Scott

INVOICE

73198

DATE

2/21/26

PRESENTING CLINICAL SIGNS

Full-body radiographic evaluation requested in collaboration with the owner due to the patient not feeling well.

Patient appears restless and unable to lie down comfortably. Owner reports decreased appetite, reduced activity level (ADR), and lethargy. No definitive focal abnormalities were identified on physical examination to localize the source of discomfort.

RADIOGRAPHIC STUDY OF THE THORAX, ABDOMEN, SPINE, FRONT & HIND LIMBS

24 radiographs are available for review. Lateral views of the thorax and abdomen were not submitted, nor lateral views of the thoracolumbar spine.

RADIOGRAPHIC FINDINGS

Thorax

The surrounding bony structures are within normal limits.

The extrathoracic soft tissues present homogeneous without abnormalities.

The heart is of normal size and shape and there is no evidence of cardiac chamber or vascular enlargement. The pulmonary vasculature is within normal limits.

The cranial mediastinum presents the expected soft tissue opacity. The mediastinal width is less than twice the width of the vertebral column at the same level.

The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

The lung parenchyma presents the expected architecture and opacity. The intrapulmonary vascular branching is seen up to the third order lung vessels.

The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

Abdomen

The surrounding bony structures are within normal limits.

No abnormalities of the extra-abdominal soft tissues are noted. The abdominal wall is smooth and thin.

The serosal detail is maintained throughout the peritoneal and retroperitoneal space.

The liver is appropriate in position and size and presents uniform opacity.

The splenic head is in the anticipated position and within normal limits for size and opacity. The splenic body and tail are considered normal for position, size, shape, and opacity.

Both kidneys are seen and present with normal size, shape, delineation, and opacity. The urinary bladder is in its anticipated position. No radiopaque calculi are noted throughout the upper and lower urinary tract.



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The stomach is in its anticipated position and presents normal content.

The small intestinal loops are of even diameter and non-dilated. A small amount of gas is seen within the small intestinal loops and considered within normal limits.

The colon is seen in the expected position and presents with appropriate content.

Cervical Spine & Lumbosacral Junction

Vertebral alignment and vertebral body morphology are normal. The intervertebral disc spaces are maintained. There is no evidence of discospondylitis, fracture, lysis, or clinically significant spondylosis.

Pelvis & Coxofemoral Joints

The pelvic canal and hip joints are unremarkable. No signs of hip dysplasia, luxation, or acute osseous abnormality.

Elbows

The medial coronoid processes in both elbows appear blurry in the cranial contour with reduced opacity and indistinct margins. Mild periarticular osteophyte formation is present in both elbows as well. There is no evidence of significant joint incongruity or subchondral bone defects.

Stifles

Bilateral prior TPLO procedures are noted. Implants are appropriately positioned with no evidence of loosening or failure. Mild to moderate osteoarthritic changes are present bilaterally. No radiographic evidence of surgical complication is seen.

Shoulders & Tarsi

The shoulders and tarsi present within normal limits.

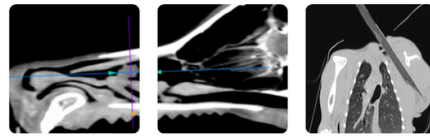
RADIOGRAPHIC DIAGNOSIS

- Bilateral medial coronoid process pathology with mild secondary elbow osteoarthritis.
- Status post bilateral TPLO with mild to moderate secondary stifle osteoarthritis and no evidence of complication.
- No clinically significant abnormalities detected in the thorax, abdomen, spine, pelvis, shoulders, or tarsi.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The study does not reveal a visceral or spinal cause for the patient's non-specific systemic signs. The most significant abnormalities are chronic orthopedic changes, particularly involving both elbows and to a lesser extent the post TPLO stifles. Bilateral elbow disease can be a source of discomfort in large breeds and may manifest as pain or lameness. The findings need to be correlated with a general and orthopedic examination since systemic or general signs are less likely to be caused by elbow arthropathy.

*Note the comments regarding lacking lateral images of the thorax and abdomen and thoracolumbar spine.



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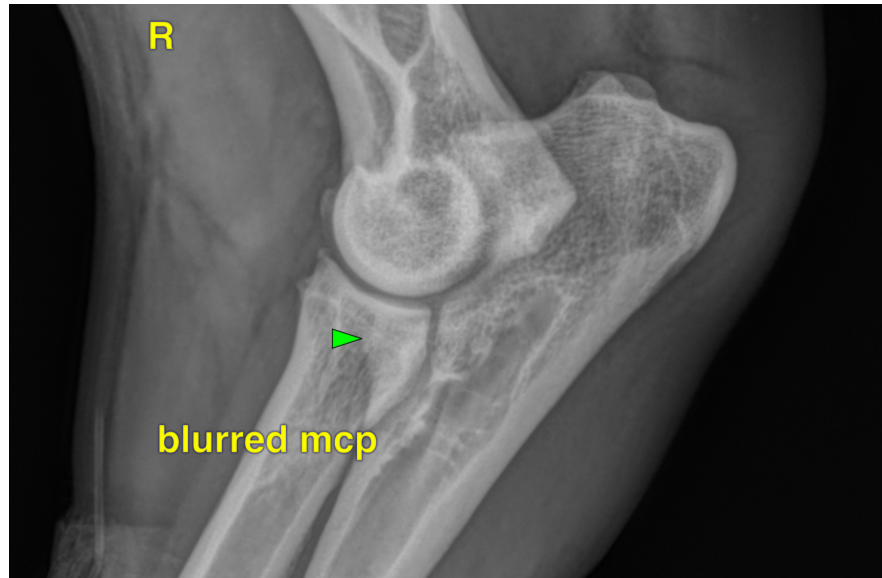
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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