



PATIENT

Toddy White

PRESENTING CLINICAL SIGNS

ACUTE ONSET FORE LIMB LAMENESS LF - ISOLATING TO ELBOW WEAK BILATERAL HIND - NO NIDUS OF PAIN
Abnormal PE/Chem/CBC/UA Results: NOT PERFORMED

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE FRONT LIMBS & SPINE

Plain and post contrast studies available for review.

BREED

Australian Shepherd

COMPUTED TOMOGRAPHIC FINDINGS

Front Limbs

A 4.0 x 2.5 mm sized sclerotic fragment is isolated from the tip of the left medial coronoid process. The base of the medial coronoid process presents sclerosis. Subchondral bone flattening of the medial humeral condyle is seen. A spherical mineralized ovoid structure of 4mm diameter is seen in the medial joint compartment. Moderate osteoarthritic changes are seen.

SEX

MN

Linear mineralizations are seen palmar of the proximal metacarpus in the position of the digital flexor tendons. Mild osteoarthritic changes of the carpal metaphalangeal joint and mild regional soft tissue swelling are seen.

AGE

13

The shoulders present within normal limits.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Spine

Severe degenerative lumbosacral stenosis with severe intervertebral disc protrusion, vacuum phenomenon of the in situ disc, sclerosis of the vertebral end plates, and moderate spondylosis is seen.

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There is a mild L6/7 intervertebral disc protrusion.

Faintly hyperattenuating lateralized intervertebral disc hernia is seen between L3 and L4 in the right ventral epidural space. Mild spinal cord compression is evident. The intervertebral disc space is mildly narrowed.

REFERRING VET

Eamon

Mild spondylarthroses are seen in the cranial lumbar spine.

There are spondyloses between T13/L1, L1/2, and L2/3.

Moderate T13/L1 intervertebral disc protrusion is noted.

INVOICE

50513

Brief review of the abdomen reveals a 5.0 x 1.2 cm sized filling defect within the right portal vein branch with extension into the main portal vein.

COMPUTED TOMOGRAPHIC DIAGNOSIS

DATE

2-23-22

- Left medial coronoid pathology with medial compartment syndrome, moderate osteoarthritis, and synovial osteochondromatosis.
- Chronic flexor tendinopathy of the left digital flexor tendons with mild carpometacarpal



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osteoarthritis.

- Severe degenerative lumbosacral stenosis - presumably chronic.
- Intervertebral disc extrusion with mild spinal cord compression - right sided L3/4.
- Moderate T13/L1 chronic intervertebral disc protrusion.
- Mild to moderate spondylarthroses and spondyloses within the cranial lumbar spine.
- Portal vein thrombosis.

SPECIES

Canine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

BREED

Australian Shepherd

The findings of the left elbow and left carpus may well correlate with the left sided front limb lameness. Severe degenerative lumbosacral stenosis may explain the weakness in the hind limbs, however, the presence of a large portal vein thrombus should be noted and screening for systemic disease associated with a hypercoagulable state is strongly recommended.

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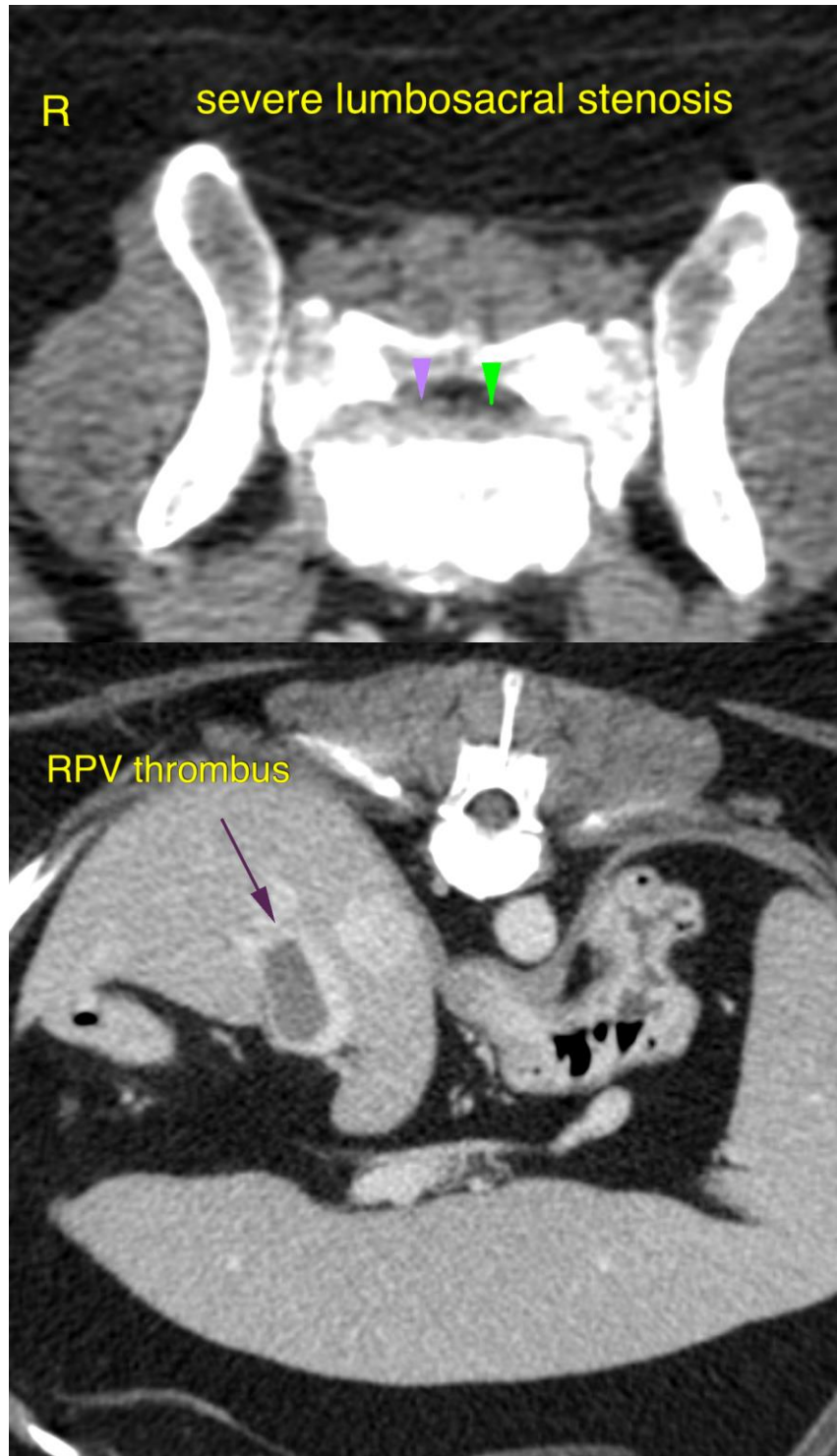
Eamon

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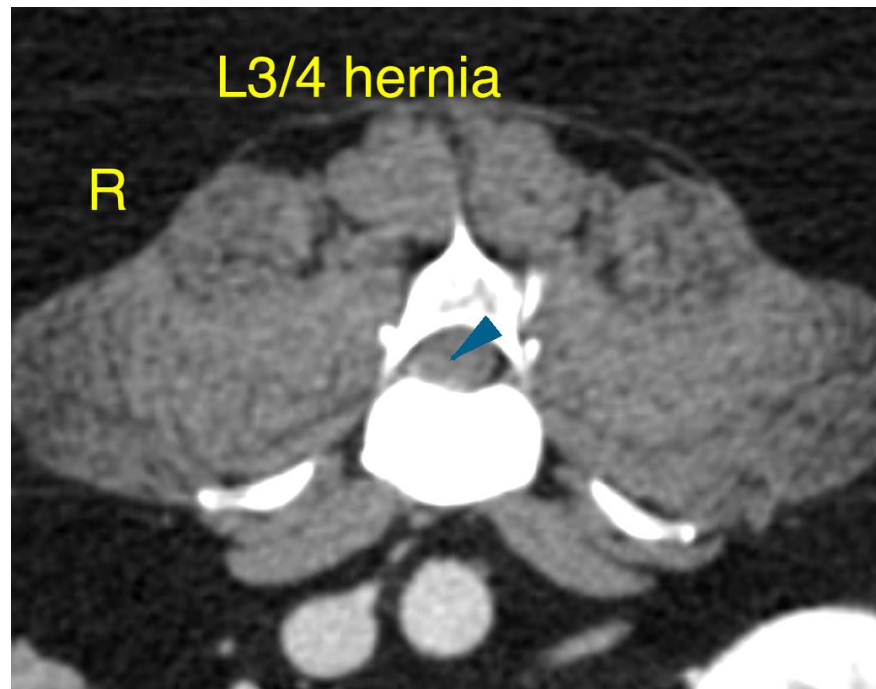
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley, DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
Nele.Eley@sonopath.com