



PATIENT PRESENTING CLINICAL SIGNS

- Austin Sutherland
- LHL lameness with reduced AROM stifle flexion bilaterally, with palpable pain on palpation of the left medial fabella at time of presentation, but palpable right medial fabella today.
 - Patient is an active agility dog with a chronic skipping gait lameness since a young age, and predilection for recurrently lower back pain.
 - Radiographs of stifles and hips are normal today but there is ankylosing spondylosis of the LS IVD.

SPECIES

Canine

BREED

Australian Cattle Dog

ULTRASONOGRAPHIC STUDY OF THE BILATERAL GASTROCNEMIUS ORIGIN AND PES ANSERINUS INSERTION

ULTRASONOGRAPHIC FINDINGS

LEFT

SEX

MN

The bone surface of the left lateral fabella presents within normal limits. However, mild smooth new bone formation is seen at the origin of the lateral head of the left gastrocnemius at the caudal distal femur.

AGE

7yr

Mild decrease in echogenicity is noted within the left lateral gastrocnemius muscle origin.

The bone surface of the left medial fabella presents within normal limits.

The medial head of the left gastrocnemius presents within normal limits

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
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The insertion of the left pes anserinus presents within normal limits.

RIGHT

The right lateral fabella bone surface presents within normal limits.

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The lateral head of the right gastrocnemius is within normal limits as well.

Minimal new bone formation is noted at the right medial fabella, likely clinically insignificant.

The right pes anserinus insertion presents within normal limits as well.

REFERRING VET

David Lane

ULTRASONOGRAPHIC DIAGNOSIS

- Ultrasonographic evidence of mild chronic lateral gastrocnemius origin musculotendinopathy
- Normal right lateral fabella and gastrocnemius head
- Normal bilateral medial gastrocnemius head
- Normal bilateral pes anserinus insertion

INVOICE

23970

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

DATE

02/24/2026

The ultrasonographic findings support the presence of mild chronic left sided lateral gastrocnemius musculotendinopathy. Evidence of musculotendinopathy of the medial head of the gastrocnemius is



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not seen ultrasonographically. The findings of the left lateral gastrocnemius musculotendinopathy are consistent with chronic soft tissue and bone adaptation rather than acute musculotendinous tear. Underlying musculotendinopathy due to chronic repetitive microfiber damage is considered likely. However, the clinical significance may be limited given the relatively subtle ultrasonographic changes.

SPECIES

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The patient's history and radiographic lumbosacral changes appear to raise suspicion for disease in the lumbosacral spine which may also be contributing to the hind limb gait abnormalities. The patient will undergo MRI of the lumbosacral region to further evaluate for lumbosacral disease. Controlled exercise to maintain stifle and hip range of motion can be considered in the meantime.

BREED

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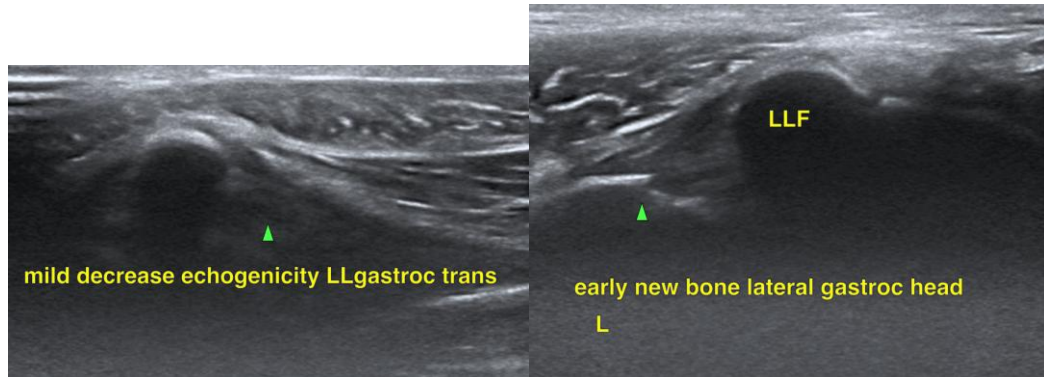
Monitoring for progression of gastrocnemius discomfort is recommended as well.

SEX

MN

AGE

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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.

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Veterinary Services

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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