



PATIENT

Nuala Johnston

PRESENTING CLINICAL SIGNS

Chronic history of SST tendinopathy and bicipital tenosynovitis that has been treated with SVF elsewhere 5 years ago. Patient was admitted today for a TPLO plus BMAC/PRP, but pain on glenohumeral extension was noted bilaterally. We plan to inject both joints and SST with BMAC/PRP using leftover material following bilateral stifle injection.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

Right Shoulder

Average maximum thickness of the right supraspinatus tendon is 9.5mm. There is moderate biceps impingement noted. Moderate internal echoarchitectural remodeling with multiple small mineralizing foci is seen within the right supraspinatus tendon. There is moderate effusion within the right bicipital tendon sheath. Moderate swelling of the bicipital synovium of up to 1.5mm thickness is noted. Moderate exostosis is present within the intertubercular groove of the biceps tendon. No structural changes of the biceps tendon itself are seen. The infraspinatus tendon presents within normal limits. A mild vacuum phenomenon is seen within the bicipital tendon sheath.

BREED

Hovawart

SEX

FS

AGE

9 Years

Left Shoulder

Average maximum thickness of the left supraspinatus tendon is 9.5mm. There is moderate biceps impingement noted. Moderate internal echoarchitectural remodeling with multiple small mineralizing foci is seen within the left supraspinatus tendon. There is moderate effusion within the left bicipital tendon sheath. Moderate swelling of the bicipital synovium of up to 1.5mm thickness is noted. Moderate exostosis is present within the intertubercular groove of the biceps tendon. No structural changes of the biceps tendon itself are seen. The infraspinatus tendon presents within normal limits.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

ULTRASONOGRAPHIC DIAGNOSIS

- Moderate bilateral supraspinatus tendinopathy with early mineralizations
- Bilateral biceps impingement syndrome with moderate chronic biceps tenosynovitis.

HOSPITAL NAME

Points East West
Veterinary Services

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The ultrasonographic findings support the presence of bilateral supraspinatus tendinopathy with biceps impingement and moderate chronic secondary biceps tenosynovitis. At this point, there is no evidence of structural lesions within the biceps tendons and conservative management (including injection of the joint and supraspinatus tendon) appears reasonable depending on the clinical correlation.

REFERRING VET

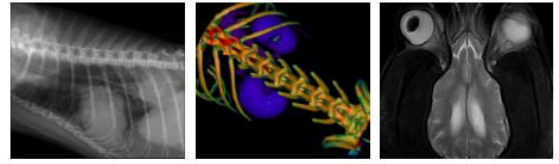
David Lane

INVOICE

56648

DATE

2-8-23



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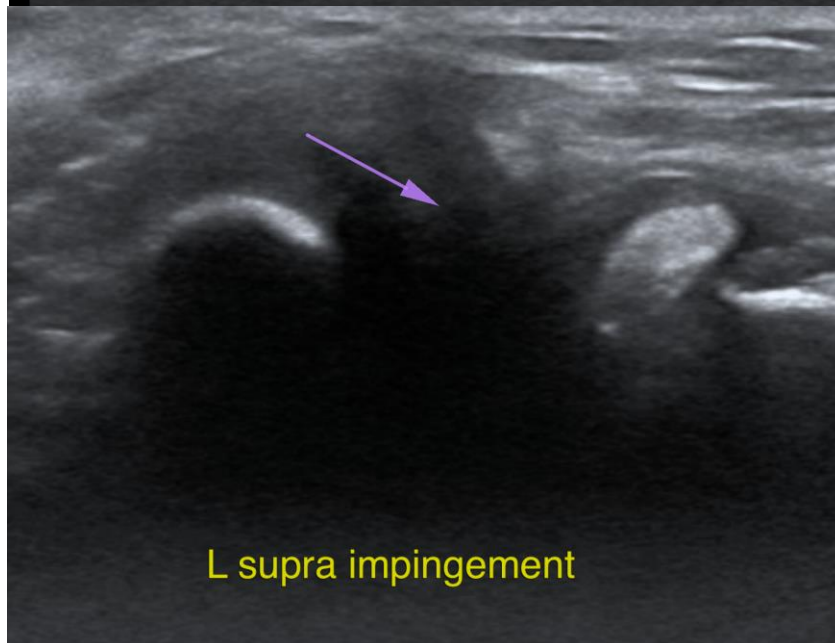
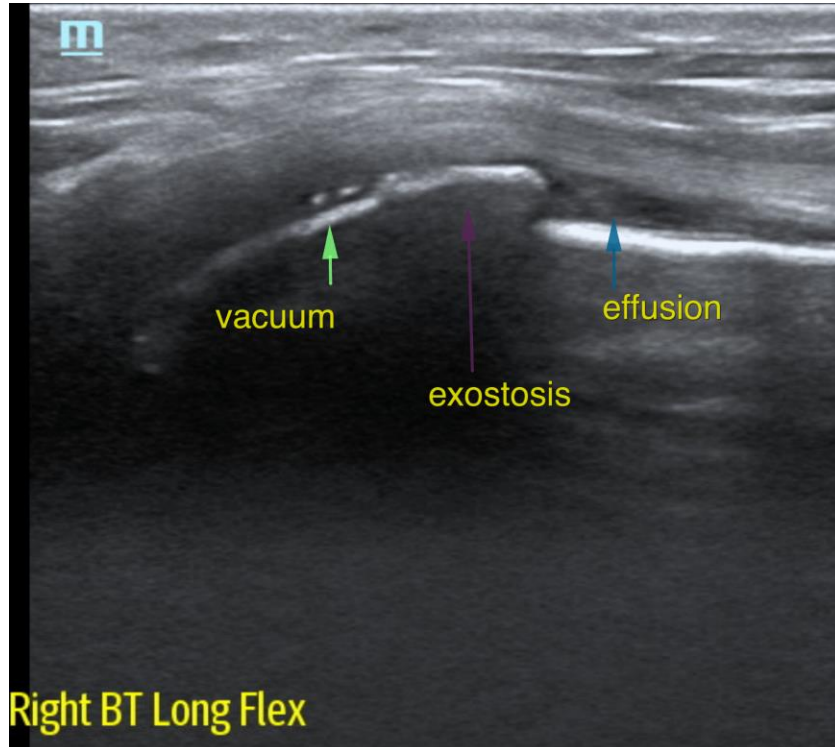
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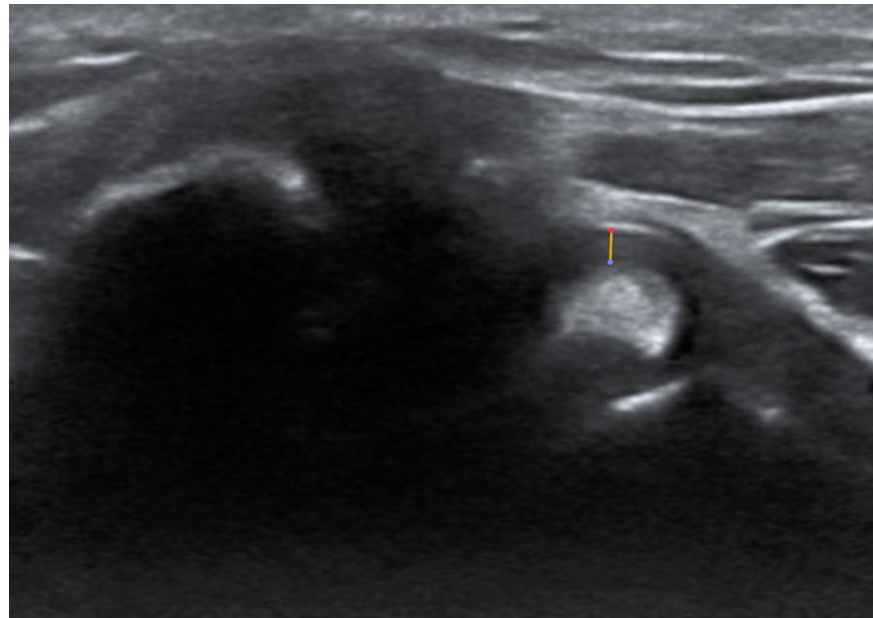
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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