

**PATIENT**

Monroe Sires

SPECIES

Canine

BREED

Lab X

SEX

Female Spayed

AGE

10 Years

INTERPRETED BYNele Eley, DVM
Dr. med. Vet. DipECVDI**HOSPITAL NAME**Franklin Animal Clinic
Inc.**REFERRING VET**

Sam Doverspike

INVOICE

50879

DATE

3-10-22

PRESENTING CLINICAL SIGNS

Dx'd w/ a partial Left ACL Tear ~3 Months ago. Treated w/ Carprofen. Some improvement but always stiff on rising and does not use left leg well. Scheduled for TTA-2 Today.
Abnormal PE/Chem/CBC/UA Results: After Ax induced, Palpation of Left Stifle: No drawer evident (Palpates similar to right stifle) At most, minimal joint effusion and some thickening in the medial aspect of joint... Radiographs: Pelvis: Significant arthritic changes present in both Hips; Both stifles appear relatively normal w/ no/minimal joint effusion (Subjectively the Left may be slightly more vs the Right). Sx was canceled pending U/S review and a trial of Cartrophen 100mg SQ weekly x4 doses was started.

ULTRASONOGRAPHIC FINDINGS**Left Stifle**

A mild amount of effusion and mild synovial swelling are seen in the supra- and infra- patellar recesses of the left stifle joint. Early periarticular bone remodeling is present. The cranial cruciate ligament presents continuous and well delineated. Mild generalized swelling of the cranial cruciate ligament is seen and there is a thin halo of anechoic effusion circumferential to the cranial cruciate ligament. The medial meniscus is in situ, well delineated, and with uniform internal echoarchitecture.

ULTRASONOGRAPHIC DIAGNOSIS

- Presumed cranial cruciate ligament edema.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The ultrasonographic study reveals mild synovialitis and effusion as well as emerging degenerative joint disease of the left stifle joint. The changes of the cranial cruciate ligament are minimal and suggest presence of edema rather than partial rupture even though emerging fiber disintegration cannot be ruled out entirely. Consider further clinical and ultrasonographic monitoring depending on the further development of the clinical presentation. At this time, no direct indication for surgical intervention can be derived from the ultrasonographic findings.



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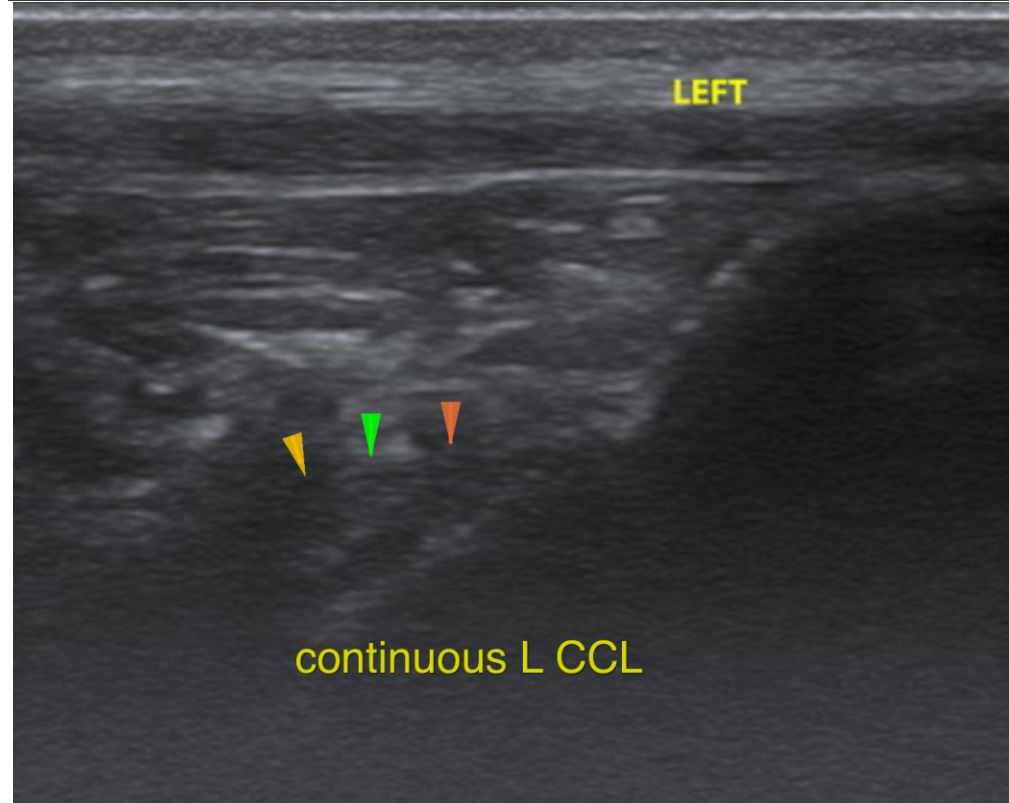
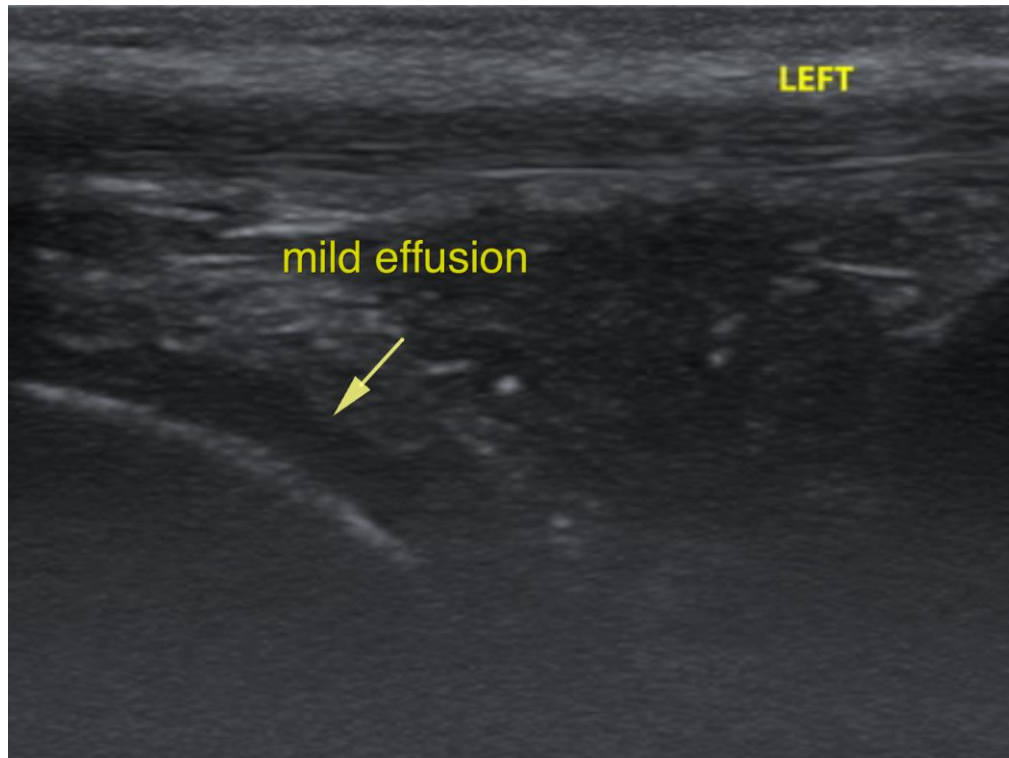
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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