



PATIENT

Mickie Zenger

PRESENTING CLINICAL SIGNS

Pt was playing and running around last night and O noticed that she was kind of favoring her BR hind leg, but this morning Pt cried out in pain and that when O saw that she was kinda of putting weight on it. O thinks she might have popped it out of place.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: BAR, nervous, panting, mm pink, no murmur ausculted, ambulatory x 4 with intermittent left hindlimb lameness, stifle effusion and tibial drawer evident, no pain on extension of hip

BREED

Labrador Mix

RADIOGRAPHIC STUDY OF THE PELVIS

2 ventrodorsal hip extended views of the pelvis and single mediolateral view of the left stifle totaling 3 images available for review.

Pelvic read requested.

SEX

FS

RADIOGRAPHIC FINDINGS

The muscle volume appears adequate and symmetric in both hind limbs.

AGE

5 Years

The coxofemoral joints presents within normal limits.

Osseous remodeling and smooth periarticular new bone formation is seen in both stifles.

There appears to be a medial buttress in the left stifle in terms of articular swelling. Focal smooth new bone formation is seen at the medial intercondylar aspect of the lateral left femoral condyle which is the anatomic position of the cranial cruciate ligament origin. (See image below.)

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

No evidence of aggressive osteolytic lesions is identified.

HOSPITAL NAME

Mountain West
Veterinary Hospital

There is a summation artifact of the superimposed fascial plane in the distal left femur.

RADIOGRAPHIC DIAGNOSIS

- Radiographically normal pelvis and coxofemoral joints.
- Mild bilateral stifle osteoarthritis with articular swelling of the left stifle.

REFERRING VET

Allison Bowersox

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of aggressive bone lesions is identified radiographically. Both stifles presents mild osteoarthritic changes which appear to be more pronounced and accompanied by articular swelling in the left stifle. At this time, there is no significant muscle atrophy in the left hind limb. Consider cranial cruciate ligament pathology, meniscopathy, traumatic effusion, primary degenerative joint disease, and arthritis potential differential diagnoses. Of which, cranial cruciate ligament pathology appears most likely as its for one most common and second there appears to be a small enthesophyte at the origin of the cranial cruciate ligament in the proximal intercondylar area of the distal left femur.

INVOICE

51134

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3-22-22



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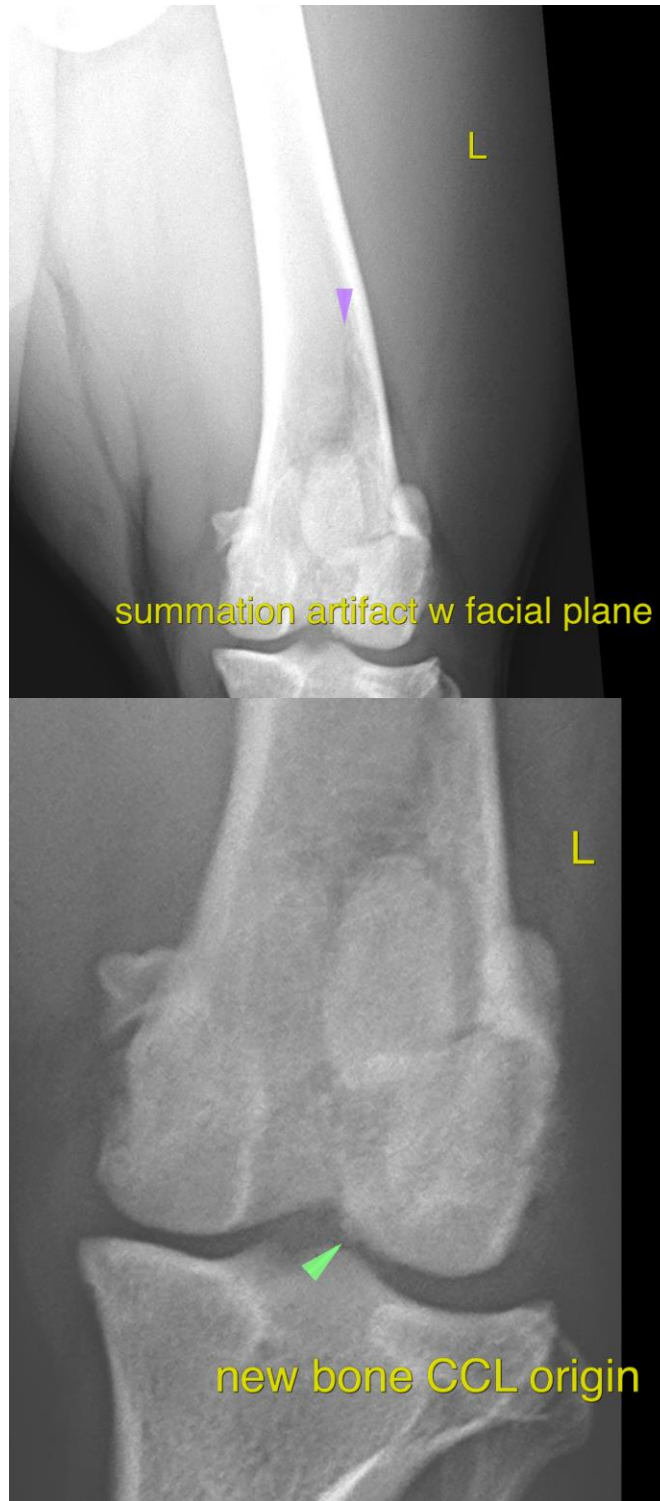
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

SPECIES

Canine

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