



PATIENT

Missy Haven
Arlauskas

PRESENTING CLINICAL SIGNS

acute lameness after chasing ball yesterday. 3 leg lame on LR leg
Abnormal PE/Chem/CBC/UA Results: 3 leg lame on LR, no drawer or thrust, but p does seem uncomfortable when thrust attempted. fine with manipulation of paw and hip and hock, no pain in groin.

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE LEFT HIND LIMB

Mediolateral and craniocaudal views of the left stifle and mediolateral and dorsoplantar views of the left tarsus totaling 4 images available for review.

BREED

Australian Cattle Dog

RADIOGRAPHIC FINDINGS

Left Stifle

SEX

SF

Moderate articular swelling of the left stifle joint is seen. There is no obvious cranial thrust of the tibia, however, mild proximal displacement of the popliteal sesamoid bone appears to be present. There is mild periarticular bone remodeling in the distal pole of the patella, the margins of the femoral trochlea, and tibial plateau. A cartilage island is seen in the proximal aspect of the tibial tuberosity which is an incidental finding.

AGE

4

Left Tarsus

Mild smooth new bone formation is seen in the lateral aspect of the tibiotarsal joint. Moderate smooth new bone formation is bridging the central and third tarsal bones in their dorsal aspect. There is no evidence of associated periarticular swelling or articular swelling and similar changes are present in the right tarsus which is included in the dorsoplantar projection.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

RADIOGRAPHIC DIAGNOSIS

- Moderate arthropathy of the left stifle joint with moderate articular swelling.
- Mild bilateral chronic degenerative joint disease of the tarsi with no evidence of acute osseous injury.

HOSPITAL NAME

Grove Veterinary
Clinic

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study reveals moderate articular swelling of the left stifle joint which may represent synovial thickening or articular effusion as well as a combination of these. The displacement of the popliteal sesamoid bone can be an indirect indicator of cranial cruciate ligament pathology. Cranial cruciate ligament pathology appear to be the main differential diagnosis in this patient with partial rupture being more likely than complete rupture. However, meniscopathy, traumatic hemarthrosis, degenerative joint disease, and other arthropathy including immune mediated cannot be ruled out entirely. Correlate with the clinical palpation and consider sedated palpation versus further imaging such as stifle MRI or ultrasound.

REFERRING VET

Dr. Burton

INVOICE

51121

Evidence of mild degenerative joint disease is noted in both tarsi which, however, is considered less likely to be responsible for the recent onset of clinical signs.

DATE

3-23-22



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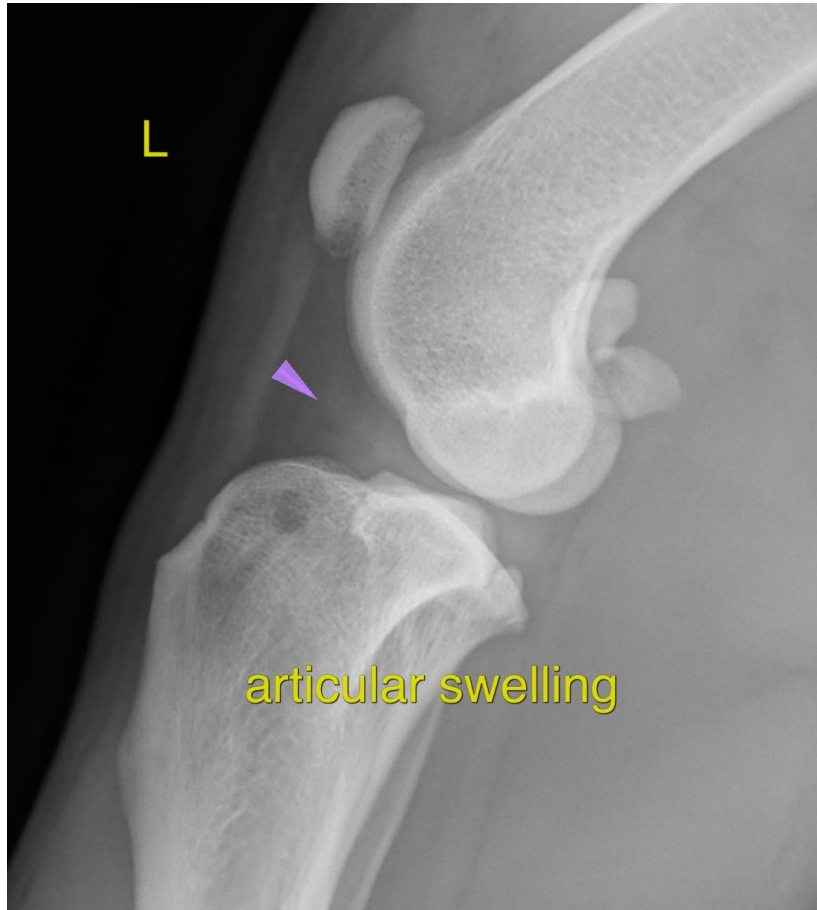
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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