



PATIENT

Maggie Morgan

PRESENTING CLINICAL SIGNS

Was playing with another dog and suddenly came up lame, on the right rear leg
 Abnormal PE/Chem/CBC/UA Results: Positive Cranial drawer, positive CTT, medial buttress increased joint fluid, thickening of the joint capsule Xrays 1. Unremarkable pelvis. 2. Severe right stifle effusion and mild arthritis compatible with an intra-articular injury such as a partial/complete cruciate rupture. The small mineral opacity is suspected to be an avulsion fragment. 3. Unremarkable left stifle. 4. Unremarkable right and left tarsus/hindfoot. 5. Gastric foreign body compatible with a rock. 6. Constipation. 7. Unremarkable thorax.

SPECIES

Canine

BREED

Lab

ULTRASONOGRAPHIC FINDINGS

Right Stifle

The right stifle joint presents severe anechoic effusion within its supra- and infra- patellar compartments. Moderate swelling of the stifle joint synovium is seen. The cranial cruciate ligament presents as an echogenic stump at the intercondylar eminence of the tibia which blends into a 2mm sized hyperechoic structure with distal acoustic shadowing compatible with the avulsion fragment. The medial meniscus is in situ. A vertical hypoechoic line can be seen in part of the caudal horn of the medial meniscus.

SEX

FS

AGE

1 Year, 2 Months

ULTRASONOGRAPHIC DIAGNOSIS

- Severe effusion and synovialitis of the right stifle joint with cranial cruciate ligament rupture and intercondylar osseous avulsion.
- Potential for concurrent medial meniscal damage.

INTERPRETED BY

Nele Eley, DVM
 Dr. med. Vet. DipECVDI

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The ultrasonographic study reveals avulsion rupture of the right cranial cruciate ligament. The avulsion may be a result of trauma or disturbed endochondral ossification in terms of intercondylar osteochondritis. Biomechanical instability is assumed, and medial meniscal damage cannot be ruled out based on the ultrasonographic presentation of the caudal horn of the medial meniscus. Tie fiber artifact is a potential differential diagnosis.

HOSPITAL NAME

Westview Veterinary
 Hospital

REFERRING VET

Dr. Brian Barnes

INVOICE

57747

DATE

4-11-23



PATIENT

Maggie Morgan

SPECIES

Canine

BREED

Lab

SEX

FS

AGE

1 Year, 2 Months

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Westview Veterinary
Hospital

REFERRING VET

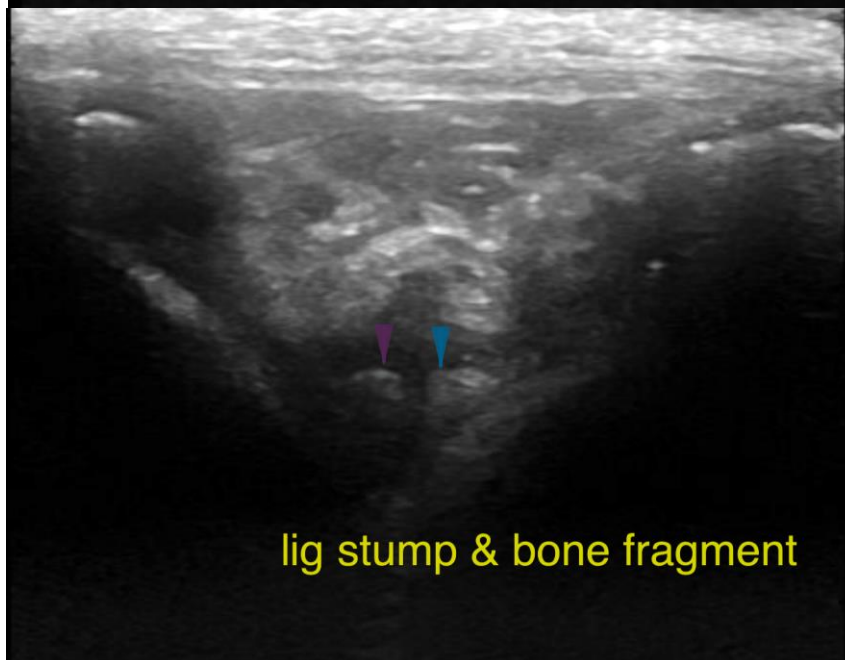
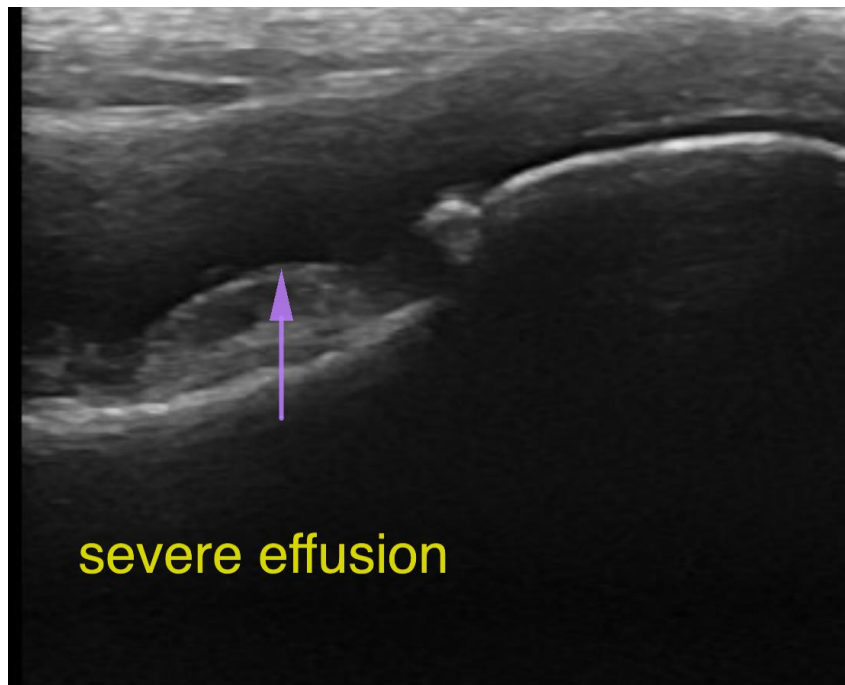
Dr. Brian Barnes

INVOICE

57747

DATE

4-11-23





PATIENT

Maggie Morgan

SPECIES

Canine

BREED

Lab

SEX

FS

AGE

1 Year, 2 Months

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Westview Veterinary
Hospital

REFERRING VET

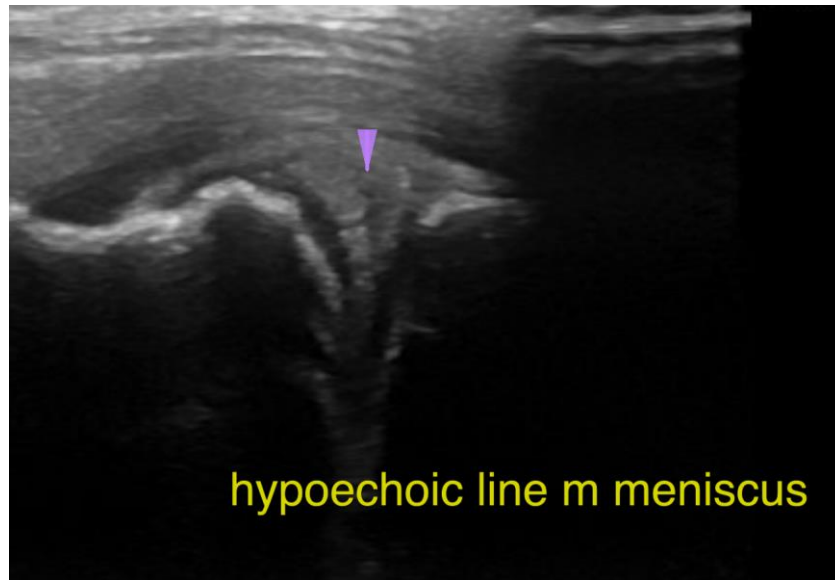
Dr. Brian Barnes

INVOICE

57747

DATE

4-11-23



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.

Nele Eley, DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
Nele.Eley@sonopath.com