



PATIENT

Bodhi Strei

SPECIES

Canine

BREED

Cavapoo

SEX

MN

AGE

9Y

WEIGHT

16.6kg

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

IMAGING PERFORMED BY

Friesen

HOSPITAL NAME

FVS Imaging/Parkland
Vet Services

REFERRING VET

Stelfox

INVOICE

74592

DATE

4-14-26

PRESENTING CLINICAL SIGNS

LFL lameness comes and goes for the past year. Has C7 issues. Nothing seems to help. Had IVDD sx at T13-L1 in 2023.

Abnormal PE/Chem/CBC/UA Results: WNL

ULTRASONOGRAPHIC FINDINGS

Left Shoulder

Supraspinatus Tendon: Mild subjective increase in thickness with average maximum thickness of approximately 7.5mm is seen. Mild internal heterogeneity and remodeling of the tendon architecture is noted. No mineralizations are identified. Mild focal impingement of the biceps tendon is noted.

Biceps Tendon/Tendon Sheath: Mild anechoic effusion is present within the biceps tendon sheath. Mild synovial proliferation is present. The bicipital groove appears smooth and regular without osteophytes or bony remodeling. There is no evidence of structural tendon changes.

Infraspinatus Muscle & Tendon: Normal echogenicity and fiber pattern. No abnormalities detected.

Periarticular Structures: Mild periarticular bone remodeling is seen in the caudal lateral aspect of the shoulder joint.

ULTRASONOGRAPHIC DIAGNOSIS

- Mild chronic supraspinatus tendinopathy with mild biceps impingement and mild biceps tenosynovitis.
- No evidence of significant structural tendon rupture or advanced shoulder disease.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The ultrasound findings indicate mild chronic soft tissue changes involving the supraspinatus tendon and biceps tendon sheath. These changes are currently low in severity and are not associated with overall structural changes or advanced degenerative joint disease. The degree of imaging abnormalities on shoulder ultrasound does not appear to fully explain the clinical lameness suggesting that the primary source of the forelimb dysfunction may be elsewhere including possible cervical spine contribution. Clinical correlation is recommended. Consider further evaluation of the cervical spine by means of advanced imaging such as MRI which could also cover for the shoulder/shoulders to rule out medial shoulder pathology in addition to rotator cuff and biceps pathology.



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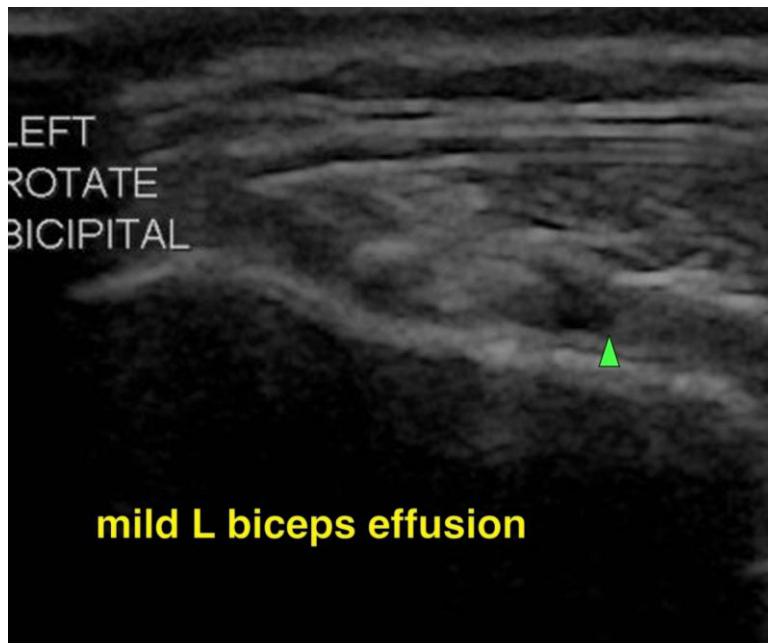
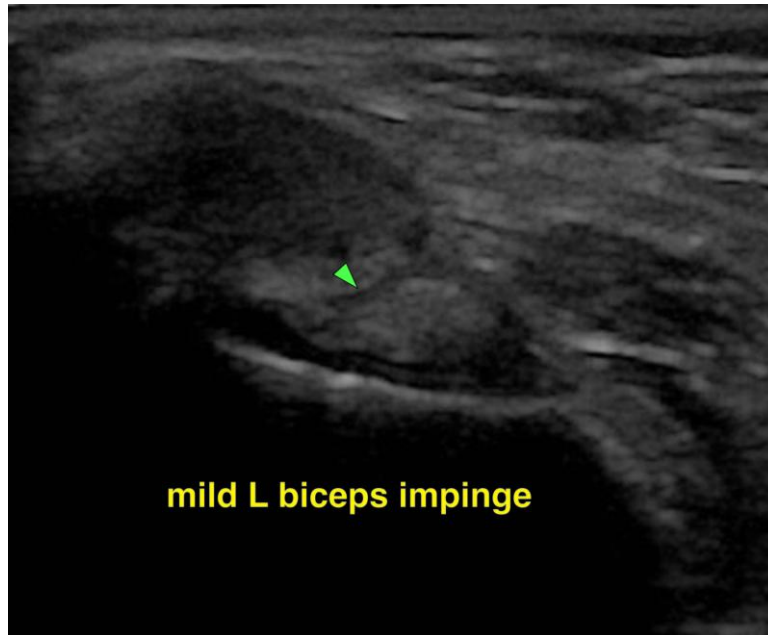
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.
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