



PATIENT

Maci Ventimiglia

SPECIES

Canine

BREED

Weimaraner

SEX

FS

AGE

12

WEIGHT

36

INTERPRETED BY

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

IMAGING PERFORMED BY

David

HOSPITAL NAME

Animal Surgical Center
- Oceanside

REFERRING VET

Kam

INVOICE

74624

DATE

4-15-26

PRESENTING CLINICAL SIGNS

weight bearing lameness on both hind limbs, left side was worst, valgus deformity on both hind limbs, left side worst, crepitus and instability on palpation of the left tarsal joint was noted. hard swelling non painful non palpation of the left tarsal joint was noted. paraparesis, CP deficits on both hind limbs, positive motor function on both hind limbs, LMN patella reflexes on both hind limbs.

COMPUTED TOMOGRAPHIC STUDY OF THE TARSI

Post contrast study is available for review.

COMPUTED TOMOGRAPHIC FINDINGS

Left Tarsus

Severe articular swelling of the left tarsocrural joint is seen. Marked tarsocrural joint collapse accentuating the medial side is seen. Joint margins are irregular with multifocal subchondral erosive changes and prominent deep subchondral sclerosis. Extensive irregular periosteal new bone formation with rough unorganized surface is seen. There is severe synovial thickening with contrast enhancement consistent with active synovitis.

Concurrent involvement of the talocalcaneal joint is seen with similar but slightly less pronounced changes.

A 10% valgus angulation of the left tarsocrural joint is seen. Presence of periarticular soft tissue thickening is noted.

The mid and distal tarsal joints are relatively spared.

Right Tarsus

The right tarsus presents moderate degenerative and mild erosive changes similar in distribution to the left but less severe. Mild subchondral bone sclerosis and moderate periosteal new bone formation with mild synovial thickening is seen.

The valgus deformity appears to be minimal on the left side during positioning for CT.

The mid and distal tarsal joints of the right tarsus are preserved.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Severe chronic erosive and proliferative arthropathy of the left tarsocrural and talocalcaneal joints with joint space collapse and presumed instability, subchondral bone erosion and sclerosis, marked synovitis, and extensive periosteal new bone formation.
- Milder bilateral involvement of the right tarsus suggesting a bilateral process.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The imaging features are most consistent with severe chronic erosive inflammatory arthropathy such as immune mediated polyarthritis. Septic arthritis remains a possible differential diagnosis despite being less likely particularly given the erosive changes. A primary degenerative joint disease alone is considered less likely given the severity and erosive nature.



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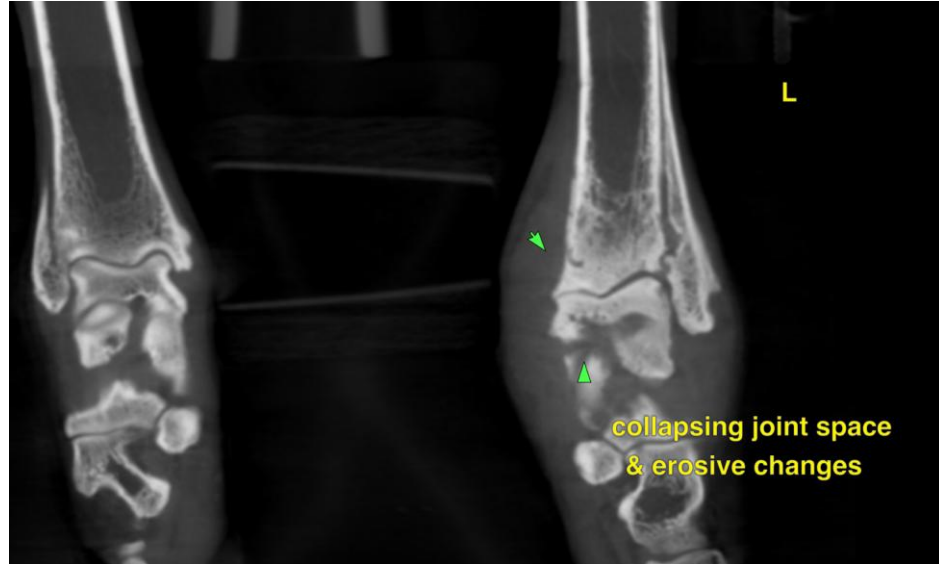
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Joint sampling including arthrocentesis for cytology, culture, and sensitivity as well as synovial biopsy, if required, is strongly recommended. Consider infectious disease testing including tick-borne arthropathy as well as systemic workup for immune mediated disease.



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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.

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.

IMAGING PERFORMED BY

David

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