



PATIENT

Patches Eckelberg

SPECIES

Canine

BREED

Boston Terrier

SEX

FS

AGE

9Y, 7M

WEIGHT

38.80lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Raul Casas

HOSPITAL NAME

State Avenue Vet
Clinic

REFERRING VET

Dr. Raul Casas

INVOICE

74667

DATE

4-20-26

PRESENTING CLINICAL SIGNS

Presents for evaluation of chronic right pelvic limb lameness and management of Cushing's disease.

- Chronic right pelvic limb lameness; prior left stifle surgery (2019).
- Diagnosed with Cushing's disease; on trilostane (Vetoryl) 20 mg PO BID.
- On carprofen 37.5 mg PO BID (1/2 of 75 mg tab BID).
- Gabapentin trialed; minimal efficacy per client.
- Flexadin supplement trialed; glucosamine ineffective.

- Right stifle partial cranial cruciate ligament tear diagnosed March 2026 (Florida).
- Marked improvement in PU/PD and abdominal distension since starting trilostane.
- No vomiting, diarrhea, coughing, or sneezing.
- Eating and drinking normally.

- Significant improvement with carprofen; lameness returns off NSAID.

Abnormal PE/Chem/CBC/UA Results: ABNORMALS: - Overweight (BCS 7/9) - moderate dental disease; 108 and 208 with gingival recession, possible fractures - moderate to significant right pelvic limb muscle atrophy (right thigh ~2/3 size of left) - right stifle: drawer present, mild pain on manipulation, no thrust - right hock: soft tissue swelling, pain on palpation, crepitus Bloodwork wnl

COMPUTED TOMOGRAPHIC STUDY OF THE TARSI

Plain study available for review.

COMPUTED TOMOGRAPHIC FINDINGS

Right Tarsus

Marked articular swelling and periarticular soft tissue swelling centering the tarsocrural joint are seen. Prominent periarticular osteophytes formation involving the distal tibial talus, calcaneus, and adjacent periarticular margins is seen. Associated subchondral bone sclerosis consistent with chronic degenerative change is seen. There is no evidence of subchondral bone defects, aggressive osteolysis, permeative or destructive bone pattern. No erosive changes are noted.

A well-defined smoothly marginated mineralized ossicle is present distal to the lateral malleolus consistent with chronic enthesiophyte or accessory ossicle/chronic avulsion fragment.

Left Tarsus

The left tarsus presents no significant articular or periarticular changes.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Marked advanced degenerative joint disease/osteoarthritis of the right tarsocrural joint with articular and periarticular soft tissue swelling.
- Chronic mineralized ossicle at the right lateral malleolus – likely incidental or related to prior injury.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The findings are most consistent with advanced chronic osteoarthritis of the right tarsocrural joint which correlates well with the patient's history. No CT evidence of septic arthritis, neoplasia, acute fracture, or instability is seen. The severity of the changes suggests a long standing process such as secondary to chronic instability, prior ligamentous injury, abnormal biomechanics, and less likely arthritis. Cranial cruciate ligament disease and Cushing's disease may indirectly contribute to muscle



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weakness and altered joint support. Consider aspiration and analysis of synovia to rule out differential diagnosis and rule out clinical tarsal instability.



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.

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