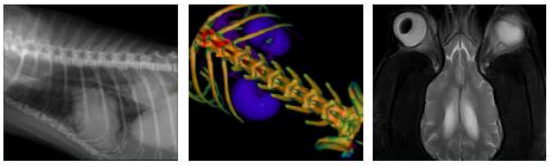

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1-800-838-4268 info@sonopath.com

PATIENT

Mia Brovege

SPECIES

Canine

BREED

Labrador Retriever

SEX

Spayed

AGE

6 Years, 2 Months

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Elizabeth Animal Hospital

REFERRING VET

Kim Allyn, DVM

INVOICE

57980

DATE

4-25-23

PRESENTING CLINICAL SIGNS

History Notes: When they got back in town Sunday, noticed she was limping on LF. Did lose balance while playing with housemate yesterday and fell on hardwood Seems to be improving today
Abnormal PE/Chem/CBC/UA Results: Ambulatory X 4, lame on left front Neck, spine, and tail are normal. Decreased range of motion left elbow paw appears normal No labs performed

RADIOGRAPHIC STUDY OF THE ELBOWS

Neutral and flexed mediolateral as well as craniocaudal pronated views of both elbows totaling 6 images available for review.

RADIOGRAPHIC FINDINGS

Right Elbow

Reduced opacity and cranial contour blurring of the tip of the right medial coronoid process are seen. subtrochlear notch sclerosis of the ulna is noted as well as a large amount of periarticular osteophytes and medial and lateral humeral epicondylar enthesophytes. A 3mm sized isolated fragment is seen in the craniocaudal view.

The medial joint compartment is narrow. Subchondral bone sclerosis of the medial humeral condyle is seen.

Left Elbow

Blurring and decreased opacity of the cranial contour of the medial coronoid process are seen. There is subtrochlear notch sclerosis of the ulna. A large amount of periarticular osteophytes is present as well as lateral and medial humeral epicondylar enthesophytes.

The medial joint compartment is narrow. Sclerosis of the subchondral bone of the medial humeral condyle is noted.

An isolated fragment cannot be seen definitively in the craniocaudal view.

RADIOGRAPHIC DIAGNOSIS

- Bilateral medial coronoid pathology with severe secondary osteoarthritis, medial compartment syndrome as well as flexor and extensor enthesopathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings are compatible with bilateral medial coronoid pathology. Severe secondary osteoarthritic changes are present. There also is evidence of end stage degenerative joint disease with medial compartment syndrome as well as concurrent flexor and extensor enthesopathies.

An isolated fragment is seen in the right elbow. Presence of a fragment or fragments within the left elbow is likely as well. Further definition by means of CT could be considered since the patient may benefit from removal of free fragments within the joint and arthroscopic revision

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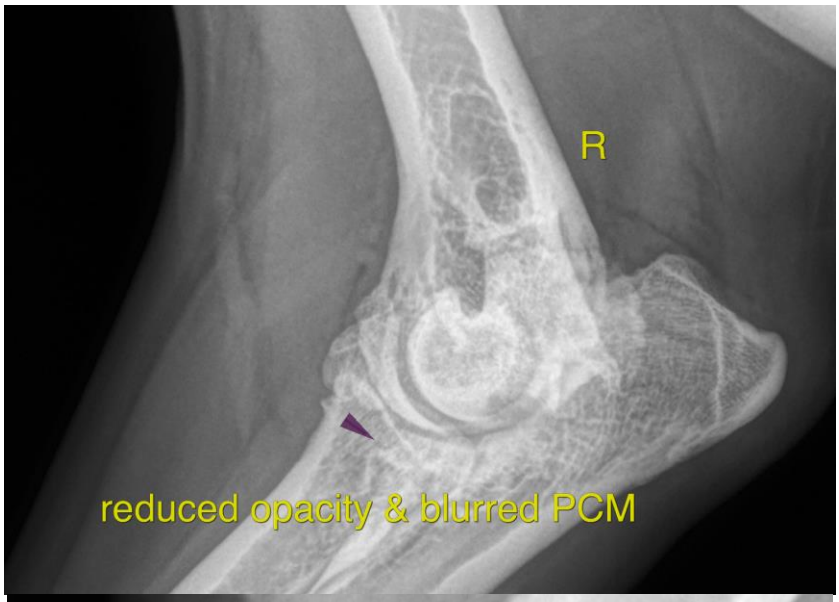
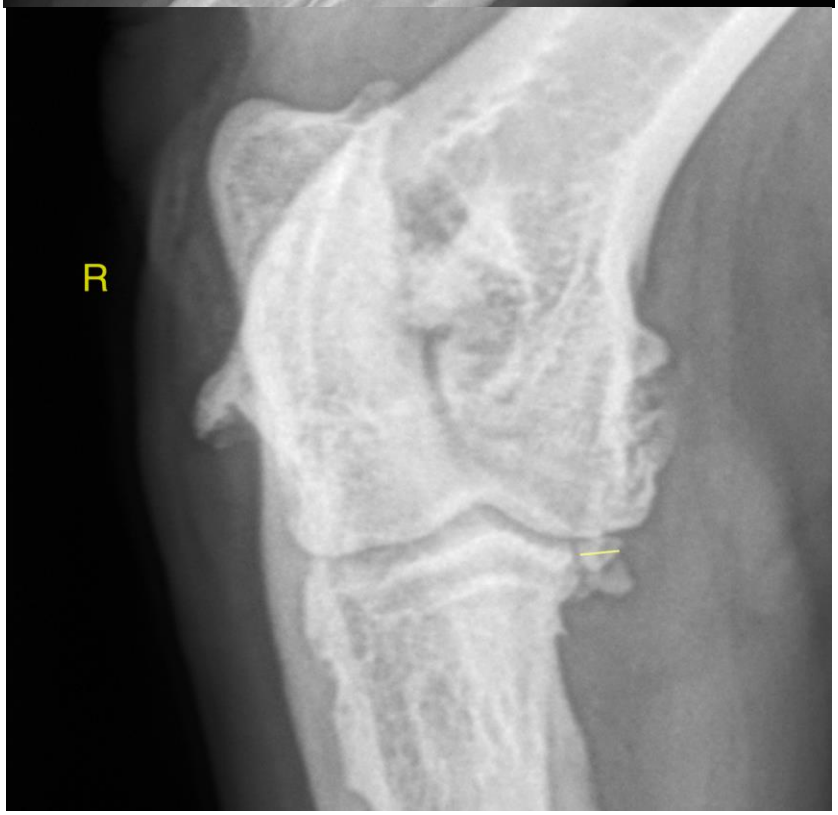
despite the advanced stage the degenerative joint disease.





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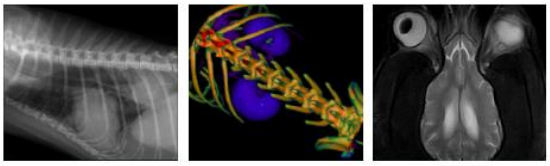

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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