



PATIENT PRESENTING CLINICAL SIGNS

Embers Olnick Acute onset LHL lameness with extensive bruising over the gracilis muscle, followed by less severe symptoms over the right gracilis a few weeks later. The muscles are currently non-painful, but have a firmer texture that raises the concern that the presumptive myopathy may be evolving into a fibrotic myopathy.

SPECIES

Canine

ULTRASONOGRAPHIC STUDY OF THE BILATERAL GRACILIS MUSCLES

BREED

Whippet

Left Gracilis

Regional loss of echoarchitecture with mild swelling and overall increase in echogenicity is seen in the proximal third of the left gracilis muscle. The regular muscle fiber pattern is lost. There appears to be replacement tissue of medium to high echogenicity with a regularly layered pattern, which however is interspersed by smaller areas of hypoechogenicity, which present volume increase in particular. The mid and distal portion of the left gracilis muscle fibers present within normal limits. No macromorphological changes of the muscle fascia are seen. The surrounding musculature presents within normal limits.

SEX

Spayed Female

Right Gracilis

The right gracilis reveals no echoarchitectural changes. Muscle fiber pattern and echogenicity are maintained and uniform throughout the entire muscle. The fascial planes are even and thin. The surrounding musculature presents within normal limits.

AGE

7 Years

ULTRASONOGRAPHIC DIAGNOSIS

- Regional loss of echoarchitecture with mild swelling and replacement tissue of medium echogenicity and mild heterogeneity in the proximal third of the left gracilis muscle.
- Normal right gracilis muscle.

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
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INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Points East West VS

The ultrasonographic findings of the left gracilis muscle strongly support the presence of healing partial rupture of the muscle. The replacement tissue reveals medium echogenicity, which is slightly increased compared with the regular muscle tissue and may represent organizing hematoma/granulation tissue. However, early fibrotic scarring cannot be ruled out and a course of PRP injections and shockwave ultrasound could be considered in order to support the healing and muscle restructuring proactively.

REFERRING VET

Dr. David Lane

The right gracilis muscle does not present any macromorphological echoarchitectural changes at this point. Fibrosing right gracilis myopathy is not supported by the current ultrasonographic presentation. However, micro fiber damage cannot be ruled out entirely.

INVOICE

46463

DATE

4/6/23



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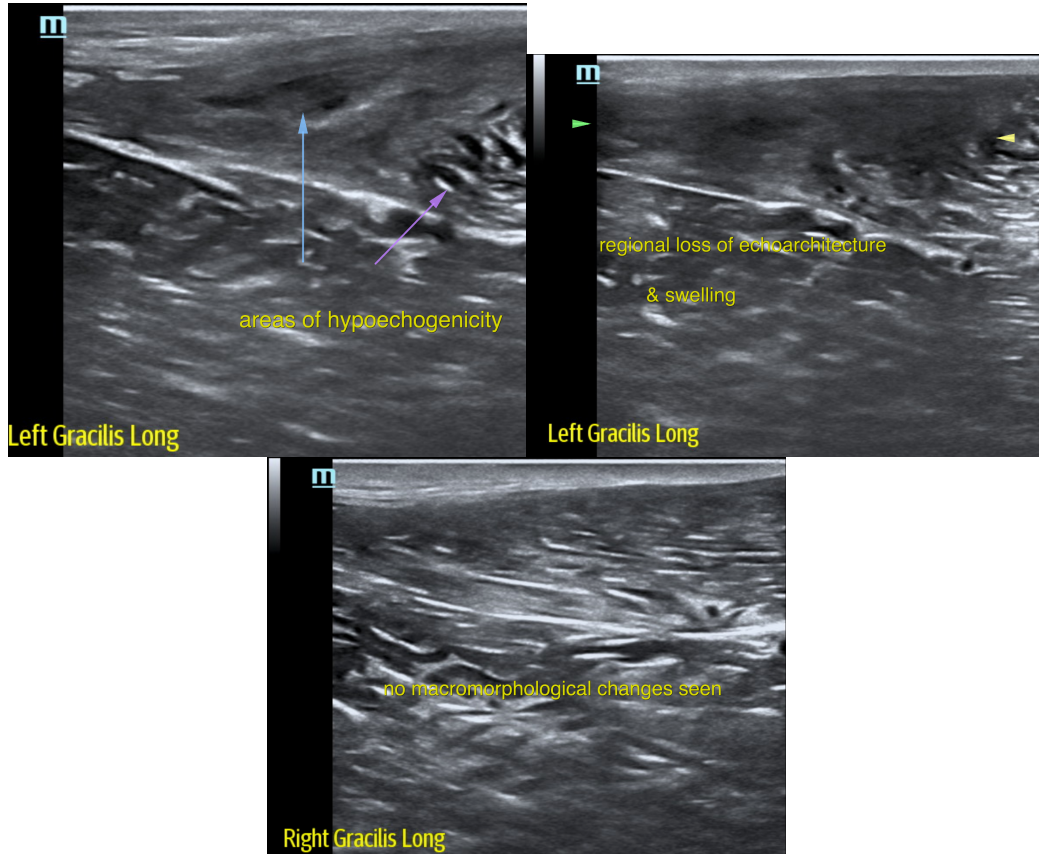
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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