



PATIENT PRESENTING CLINICAL SIGNS

Lucy Magerman Had surgery consultation while in hospital with evidence of early R cranial cruciate ligament insufficiency Assessed by AHP ER for ongoing respiratory signs, also with stertor/stridor and nasal discharge described. Note- patient has chronic history of elevated ALP with US performed in Jan 2020 unremarkable at that time. Recent UCCR elevated. Abnormal PE/Chem/CBC/UA Results: April 13, 2022: -CBC: mild reticulocytosis (144) with normal HCT (0.48), rest WNL -biochemistry: ALP 2,111 H (160), triglycerides 3.85 H (1.71) -T4: WNL -4DX: negative April 19, 2022: -UCCR: 87 (>34) April 20, 2022 -UA: USG 1.038, 18 wbc per high power, 1 rbc, neg protein, suspect presence rods + cocci -thoracic rads: consolidation R middle lung lobe -pelvic limb rads: no obvious orthopaedic abnormalities

SPECIES

Canine

BREED

PWD

COMPUTED TOMOGRAPHIC STUDY OF THE HIND LIMBS

From the pelvis through the stifles, single post contrast study in soft tissue window available for review.

SEX

FS

COMPUTED TOMOGRAPHIC FINDINGS

The right stifle joint presents moderate articular swelling as well as mild periarticular osteophytes accentuating the distal pole of the patella, cranial margin of the tibial plateau, and femoral trochlea. No significant changes of the gastrocnemius origin are seen.

AGE

9 Years

The left stifle joint itself presents within normal limits. However, swelling and increased attenuation are localized to the origin of the lateral head of the gastrocnemius caudal to the left distal femur.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Both popliteal lymph nodes present within normal limits.

The coxofemoral joints present within normal limits as well.

HOSPITAL NAME

Animal Health
Partners

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Mild to moderate right stifle osteoarthritis.
- Left gastrocnemius musculotendinopathy.

REFERRING VET

Westgarth

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals mild to moderate right stifle osteoarthritis. One of the most common underlying causes is cranial cruciate ligament injury. The determination of which is beyond the scope of CT and usually reserved for either clinical examination, ultrasound, MRI, or CT arthrogram. The same applies to meniscopathy; however, in context with the presence of clinical laxity, this may be diagnostic for cruciate ligament injury.

INVOICE

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The right gastrocnemius presents no structural abnormality; however, in the left stifle, the CT study reveals evidence of lateral gastrocnemius musculotendinopathy which is common in herding dogs and typically due to repetitive microtrauma. Clinical correlation is required in order to determine its relevance.

DATE

5-31-22



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REFERRING VET

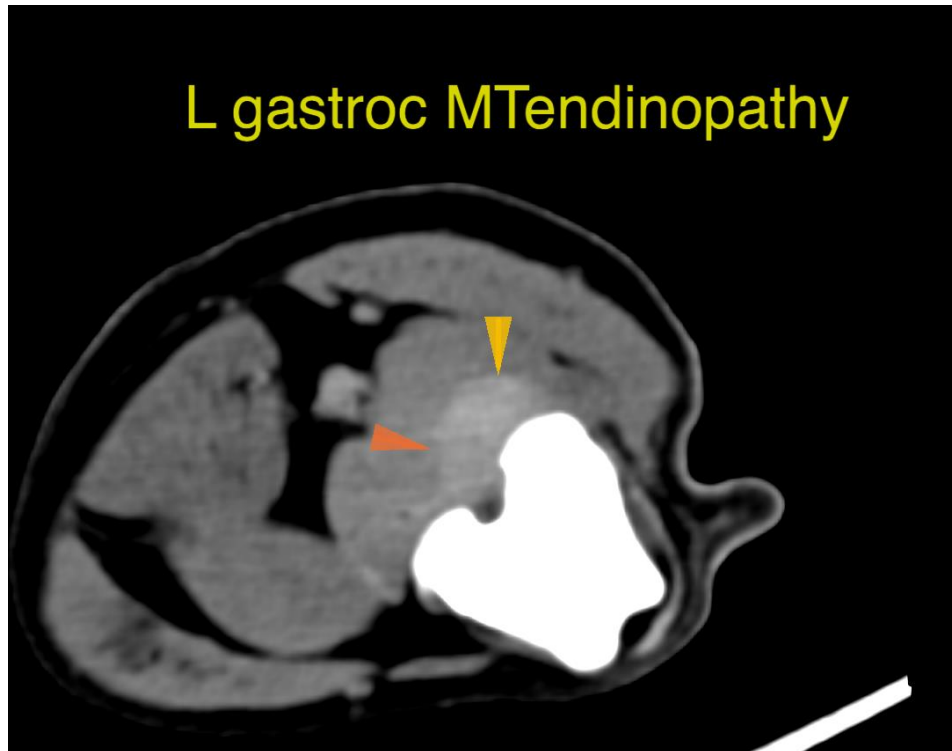
Westgarth

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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.

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