



PATIENT

Genesis Esen

SPECIES

Canine

BREED

Belgian Malinois

SEX

F

AGE

6Y

WEIGHT

29kg

INTERPRETED BY

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

IMAGING PERFORMED BY

David Lane

HOSPITAL NAME

Points East West
Veterinary Services

REFERRING VET

David Lane

INVOICE

74879

DATE

5-4-26

PRESENTING CLINICAL SIGNS

Intermittent RHL lameness following explosive exercise in a high level protection sport dog. Pain on right stifle flexion and extension, and point tenderness on the insertion of the sartorius (or semimembranosus?) muscle on the caudomedial tibia proximal to the gracilis insertion. No specific trauma seen; lameness started when running in the woods. Radiographs demonstrate right stifle effusion and soft tissue mineralization.

ULTRASONOGRAPHIC FINDINGS

Right Stifle

The cranial cruciate ligament is incompletely visualized; however, based on available information, cranial cruciate ligament pathology is strongly suspected. Moderate joint effusion with anechoic fluid and associated synovial thickening is seen. Mild to moderate periarticular osteophyte formation is present consistent with osteoarthritic changes. The medial meniscus is in-situ and of normal echogenicity with intact margins.

The pes anserinus insertion is moderately thick and hypoechoic with obscured fiber pattern and early foci of mineralization consistent with enthesiopathy.

The medial fabella shows mild to moderate smooth new bone formation with adjacent medial gastrocnemius origin swelling and reduced echogenicity suggestive of chronic enthesiopathy.

Left Stifle

The cranial cruciate ligament is incompletely visualized but appears within normal limits. The medial meniscus is unremarkable. Minimal periarticular new bone formation including at the medial fabella without associated gastrocnemius soft tissue abnormalities is seen.

The pes anserinus region is normal in thickness and echoarchitecture. No significant joint effusion or synovial abnormalities are identified at this time.

ULTRASONOGRAPHIC DIAGNOSIS

Right Stifle:

- Findings highly suspicious for cranial cruciate ligament pathology despite incomplete direct visualization.
- Moderate synovitis, effusion, and osteoarthritis.
- Concurrent enthesiopathy of the pes anserinus.
- Concurrent musculotendinopathy of the medial gastrocnemius origin.

Left Stifle:

- Minimal early periarticular remodeling with no clinically significant abnormalities.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The combination of joint effusion, synovial thickening, and osteophytosis in the right stifle joint strongly supports intraarticular pathology most likely involving the cranial cruciate ligament. Concurrent pes anserinus and gastrocnemius origin changes likely reflect chronic enthesiopathy, injury due to chronic overload, compensatory injury, or chronic repetitive microtrauma. Both may contribute to the clinical pain and should be considered in the management. Consider repeat ultrasound or MRI



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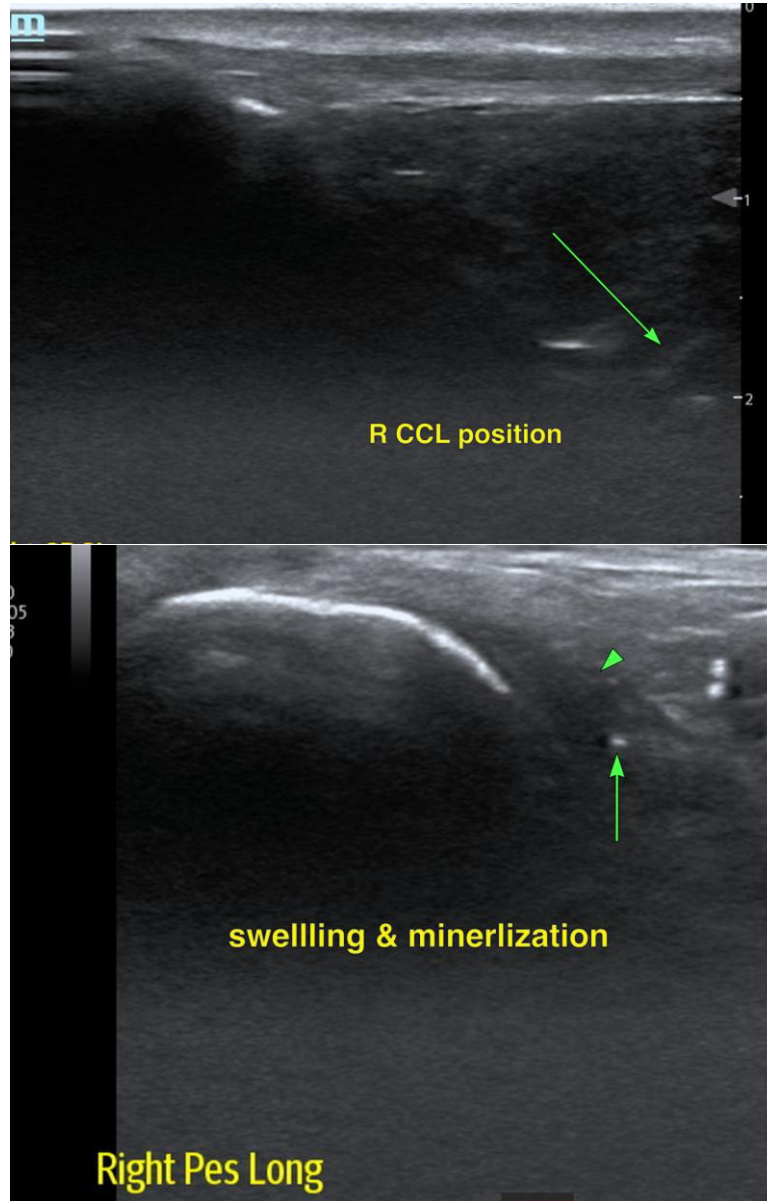
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for more detailed information about the cranial cruciate ligament to proceed with orthopedic consultation and surgery.





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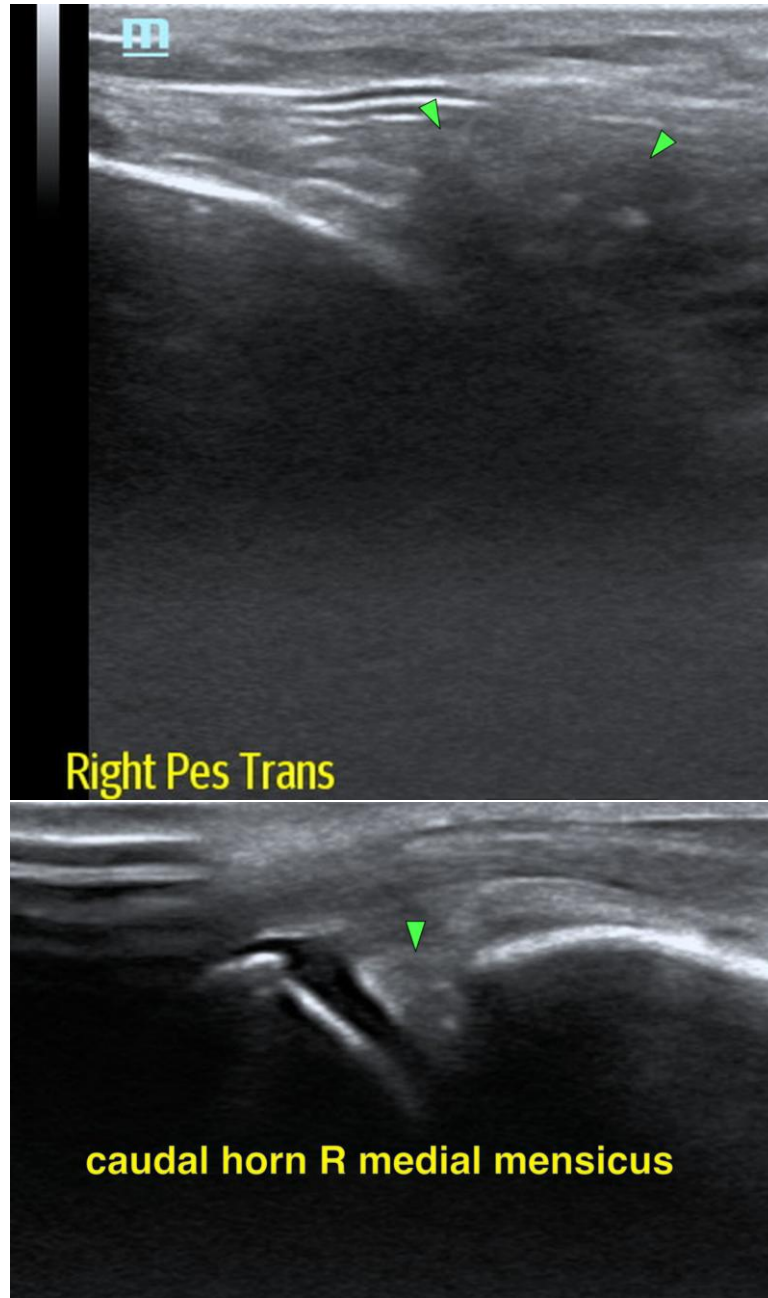
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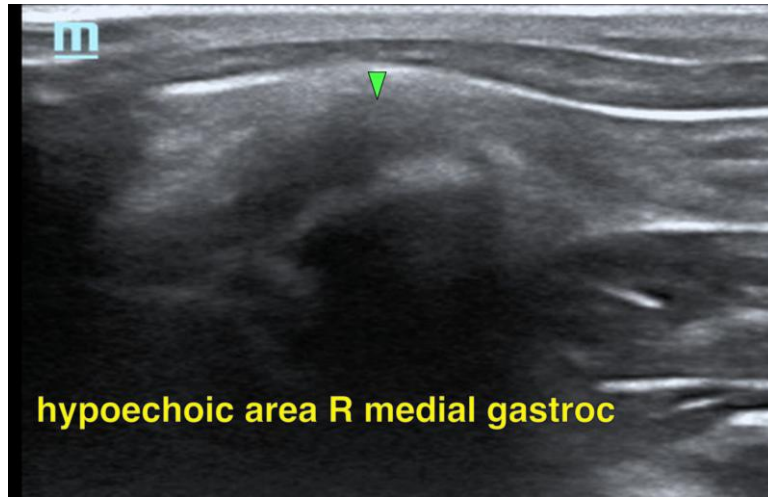
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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