



## PATIENT PRESENTING CLINICAL SIGNS

Enzo Angus Acute onset 3/5 LFL lameness of a few weeks duration following "skidding out" on smooth flooring. Pain on abduction and bilateral humeral extension, worse on right during examination, but the lameness is clearly on the left. Needle scope was performed on the left shoulder and shows marked focal inflammation associated with the cranial branch of the MGHL, and moderate fraying of the subscapularis tendon.

## SPECIES

Canine

## ULTRASONOGRAPHIC STUDY OF THE BILATERAL SHOULDERS

## BREED ULTRASONOGRAPHIC FINDINGS

Gold Retriever

### RIGHT SHOULDER

## SEX

MN

## AGE

6yr

The right supraspinatus tendon appears thickened with average maximum thickness of 8.5 mm. A focal mineralized enthesophyte is present at the insertion to the greater humeral tubercle ~ 2.5 mm consistent with chronic enthesopathy. Mild bicep tendon impingement is seen level with the intertubercular groove. There is mild distension of the bicep tendon sheath with anechoic fluid and mild focal synovial thickening consistent with mild chronic tenosynovitis. The subscapularis tendon presents mild smooth thickening with a single echogenic focus. Changes to the medial glenohumeral ligament are not seen.

### LEFT SHOULDER

Moderate internal architectural remodeling of the left supraspinatus tendon is seen. Average maximum thickness of the left supraspinatus tendon is 8.5 mm. Mild bicep tendon impingement is noted with associated mild to moderate anechoic effusion and mild to moderate synovial sheath thickening. The subscapularis tendon is markedly abnormal showing partial loss of normal fiber architecture. Heterogeneous echogenicity with mixed hypoechoic and hyperechoic regions is seen, an overall increase in thickness measuring ~ 4 mm. The medial glenohumeral ligament appears irregular and poorly defined with alternating thin and thickened segments. Both the medial glenohumeral ligament and subscapularis tendon margins are indistinct. Regional soft tissue swelling is present.

## INTERPRETED BY

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

## HOSPITAL NAME

Points East West VS

## ULTRASONOGRAPHIC DIAGNOSIS

- Right shoulder: moderate chronic supraspinatus tendinopathy with biceps impingement and mild chronic biceps tenosynovitis mild subscapularis tendinopathy unlikely to be of clinical significance
- Left shoulder: moderate chronic supraspinatus tendinopathy with mild to moderate biceps tenosynovitis, marked subscapularis tendinopathy with partial fiber disruption, desmopathy of the medial glenohumeral ligament and regional periarticular soft tissue swelling (medial aspect)

## REFERRING VET

David Lane

## INVOICE

24773

## DATE

05/05/2026

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The left shoulder shows advanced clinically relevant pathology particularly involving the subscapularis tendon and medial glenohumeral ligament consistent with significance of tissue injury. Bilateral degenerative and enthesopathic changes are seen involving the supraspinatus tendons and



**PATIENT**

Enzo Angus

tendon sheaths of the biceps with supraspinatus tendinopathy, biceps impingement and reactive chronic biceps tenosynovitis. These changes appear to be more chronic in nature and may not correlate with the cause of the current clinical presentation.

**SPECIES**

Canine

Therapeutic management of the left shoulder may entail strict activity modification, analgesia, anti-inflammatory strategy, structured physiotherapy. Interventional options including intraarticular peritendinous regenerative therapy shockwave therapy and image-guided reciprocal tendon sheath injection can be considered as well. Surgical considerations may be included if lameness persists despite adequate conservative and regenerative management.

**BREED**

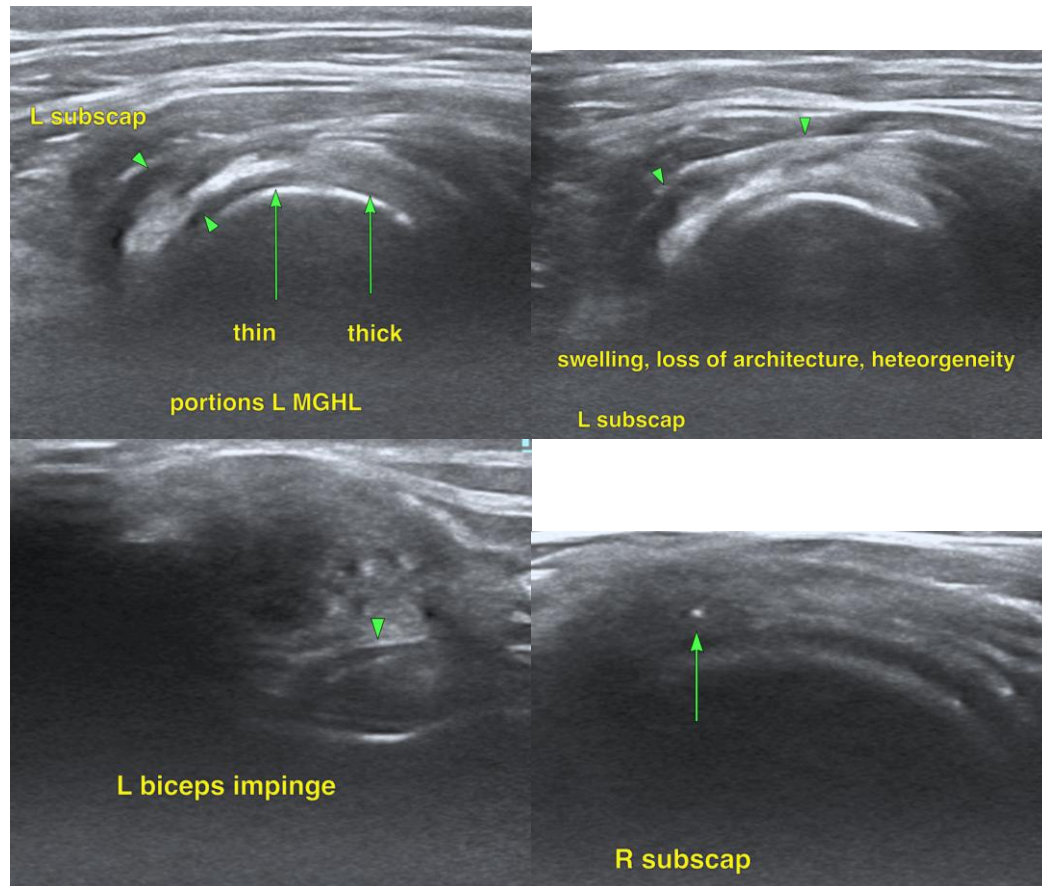
Gold Retriever

**SEX**

MN

**AGE**

6yr



**INTERPRETED BY**

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

**HOSPITAL NAME**

Points East West VS

**REFERRING VET**

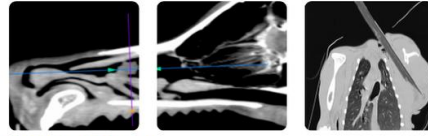
David Lane

**INVOICE**

24773

**DATE**

05/05/2026



## PATIENT

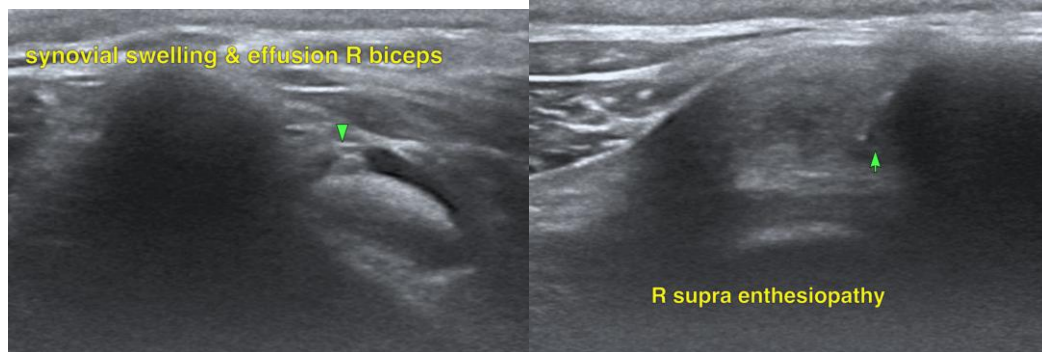
Enzo Angus

## SPECIES

Canine

## BREED

Gold Retriever



## SEX

MN

## AGE

6yr

## INTERPRETED BY

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

## HOSPITAL NAME

Points East West VS

## REFERRING VET

David Lane

## INVOICE

24773

## DATE

05/05/2026

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  
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,  
Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.  
[info@sonopath.com](mailto:info@sonopath.com)