



PATIENT

Benelli Trobridge

SPECIES

Canine

BREED

Labrador Retriever

SEX

M

AGE

2Y

WEIGHT

29kg

INTERPRETED BY

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

IMAGING PERFORMED BY

David Lane

HOSPITAL NAME

Points East West
Veterinary Services

REFERRING VET

David Lane

INVOICE

75239

DATE

6-1-26

PRESENTING CLINICAL SIGNS

High drive SAR dog with a reported clicking sound from the shoulder area but no concurrent lameness. Subsequent radiographs taken elsewhere should glenohumeral OA bilaterally. An audible click was noted on 2 occasions during manipulation (flexion with internal rotation) of the left shoulder, but no other abnormalities found.

ULTRASONOGRAPHIC FINDINGS

Left Shoulder

Average maximal thickness of the left supraspinatus tendon is 9mm. Moderate internal echoarchitectural remodeling without shadowing foci is seen characterized by nonshadowing foci and mild overall heterogeneity. Moderate biceps tendon impingement is present level with the intertubercular groove. The intertubercular groove presents a mild exostosis.

The bicipital tendon sheath contains a moderate amount of anechoic fluid with vacuum phenomenon and presents moderate synovial proliferation. The biceps tendon itself maintains normal echogenicity and fibrillar architecture without evidence of structural tendon lesion.

Mild periarticular osteophyte formation is noted.

Images of the medial compartment were not included in the left shoulder.

Right Shoulder

Average maximal thickness of the right supraspinatus tendon is 9mm. Mild internal echoarchitectural remodeling without shadowing foci is seen characterized by nonshadowing foci and mild overall heterogeneity. Mild biceps tendon impingement is present.

The bicipital tendon sheath contains a mild amount of anechoic fluid and presents mild synovial proliferation. The biceps tendon remains structurally intact without evidence of tearing or significant tendinopathy. Mild exostosis of the bicipital groove is present.

Thickening, reduced echogenic definition, and mild heterogeneity of the subscapularis tendon and medial glenohumeral ligament are seen. Mild periarticular osteophytes formation is present.

A small amount of gas/vacuum phenomenon is noted.

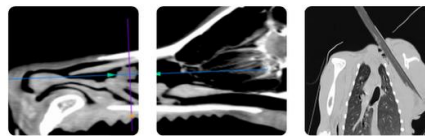
ULTRASONOGRAPHIC DIAGNOSIS

Left Shoulder:

- Supraspinatus tendinopathy with biceps impingement and chronic biceps tenosynovitis.
- Mild glenohumeral osteoarthritis.
- Vacuum phenomenon.
- Medial compartment not included in submitted images.

Right Shoulder:

- Mild supraspinatus tendinopathy.
- Mild biceps impingement with mild chronic bicipital tenosynovitis.
- Mild chronic remodeling of the subscapularis tendon and medial glenohumeral ligament.
- Mild vacuum phenomenon.



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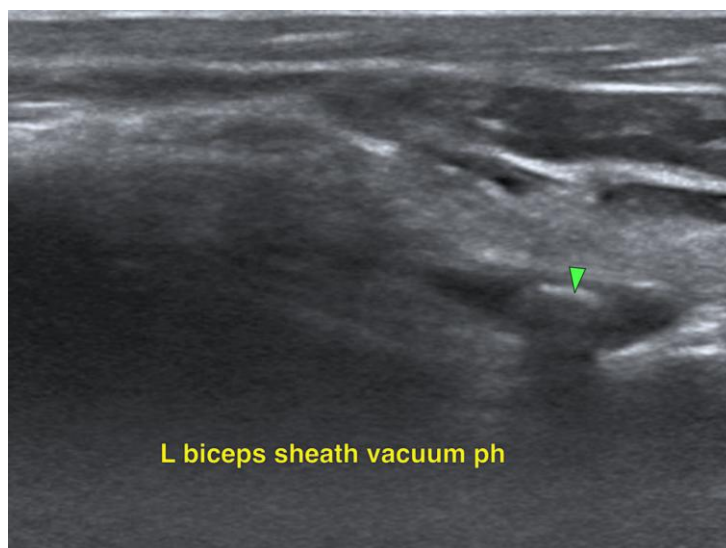
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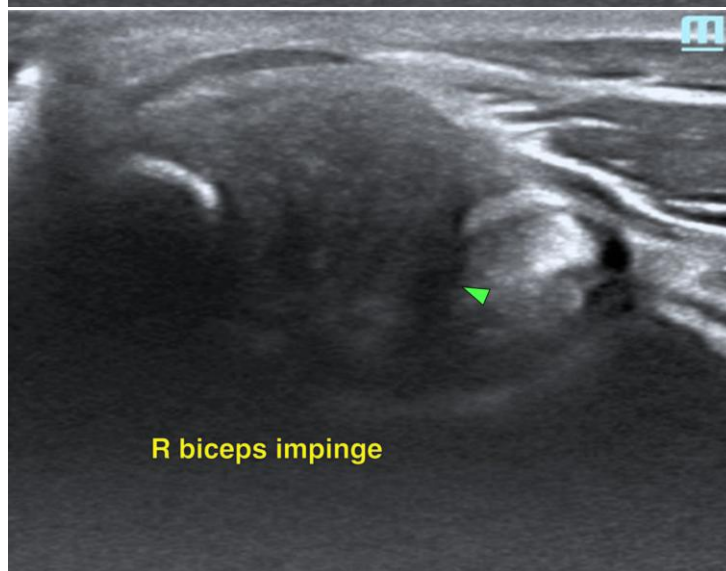
- Mild glenohumeral osteoarthritis.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

Overall, the ultrasonographic abnormalities are bilateral and more pronounced in the left shoulder corresponding to the audible click was reproduced clinically. The combination of supraspinatus tendinopathy, biceps impingement, biceps tenosynovitis, and early osteoarthritic remodeling of the shoulder joint may contribute to altered shoulder biomechanics and could potentially account for the reported clicking phenomenon. The vacuum phenomenon may represent an incidental finding related to joint positioning during examination however in some dogs it has been associated with increased joint laxity and should therefore be interpreted in conjunction with orthopedic examination findings and assessment of shoulder stability. Dynamic instability of the glenohumeral ligament appears to remain a consideration with potential involvement of the rotator cuff and medial compartment, particularly on the left side.



L biceps sheath vacuum ph



R biceps impinge



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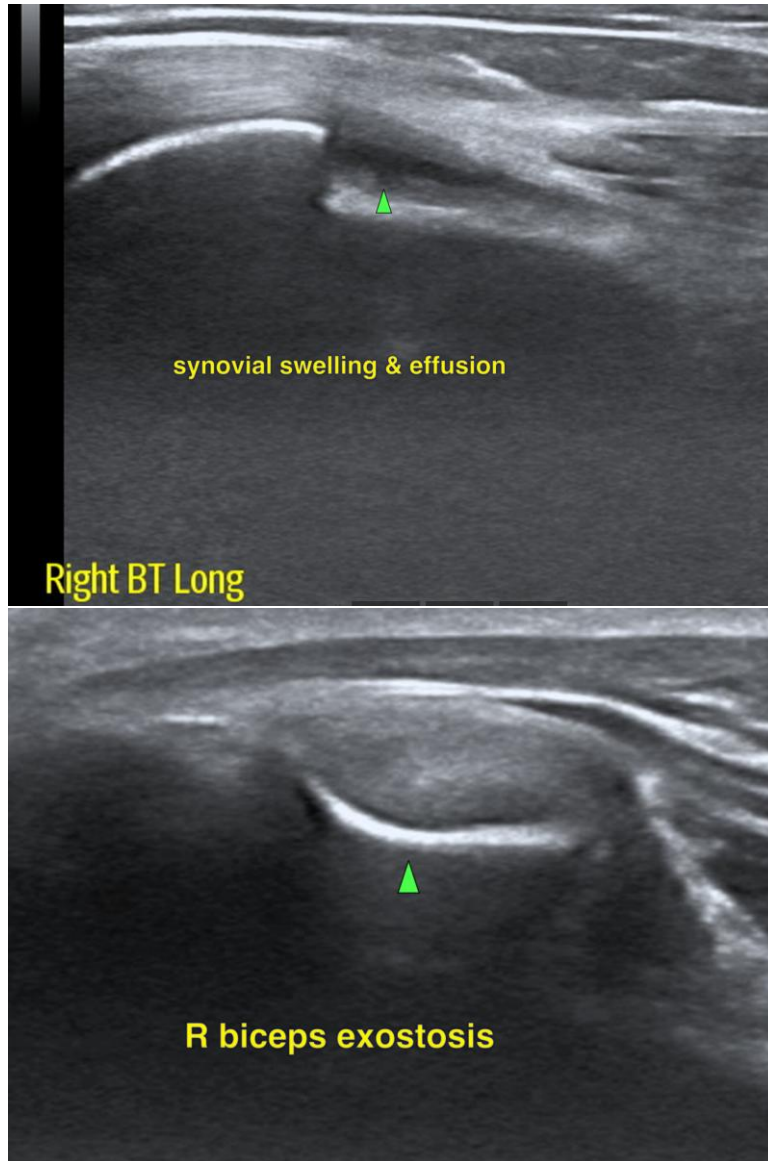
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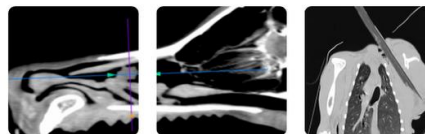
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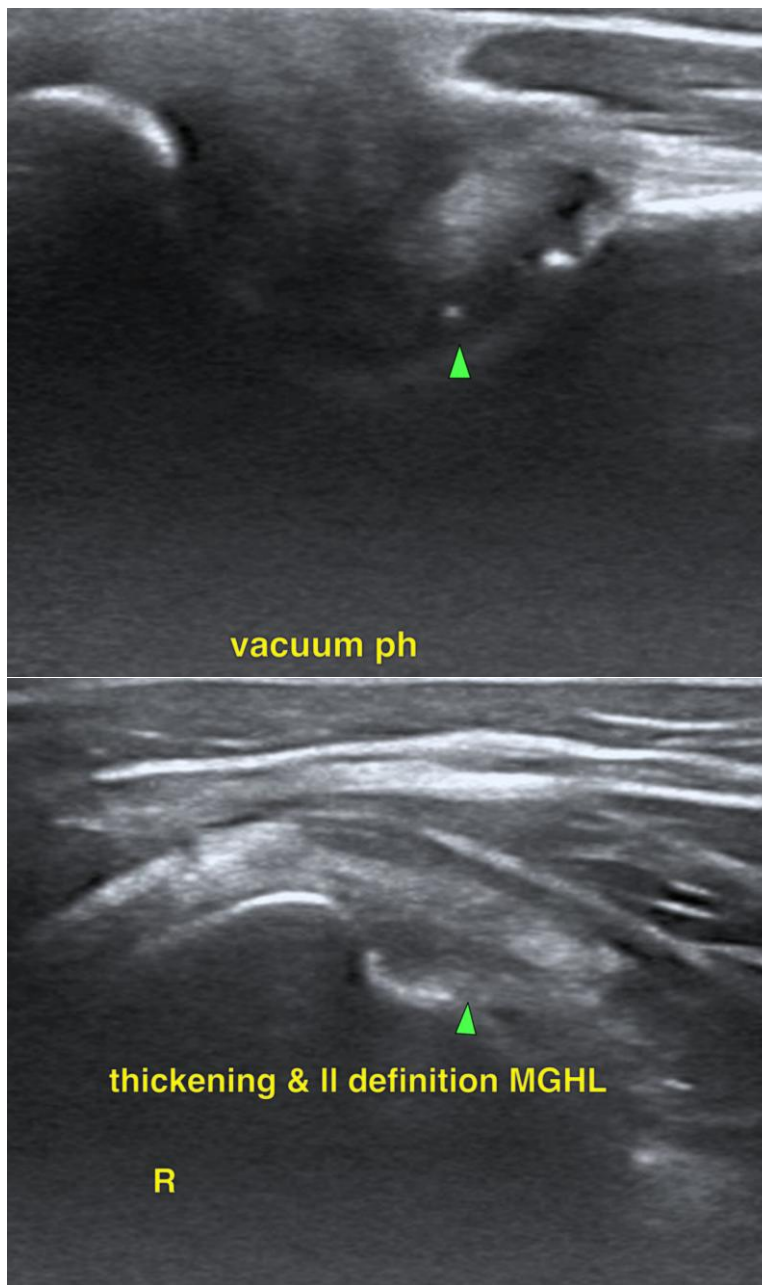
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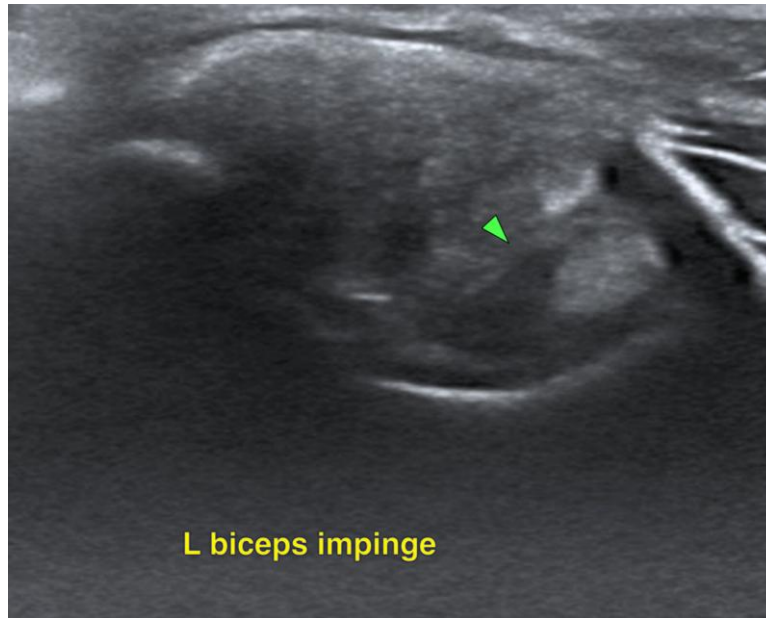
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.
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