



**PATIENT PRESENTING CLINICAL SIGNS**

Rio Flanagan History of right shoulder OCD with surgery at ~5 months of age. Occasional lameness after hard play or long hikes since shoulder surgery. Developed persistent right thoracic limb lameness after slipping on ice in December. Symptoms worse after rest and in the morning. Rio has improved with rest and pain medications (carprofen & gabapentin).

**SPECIES** Abnormal PE/Chem/CBC/UA Results: No elbow, carpal or digital pain noted on exam, although mild loss of elbow flexion present. Shoulder pain with supraspinatus stretch and medial shoulder testing (extension + abduction).

Canine

**BREED ULTRASONOGRAPHIC FINDINGS**

Golden Retriever **Left Shoulder**

**SEX** The supraspinatus, deltoideus and infraspinatus muscles present within normal limits for shape, volume, echoarchitecture and echogenicity. The transition to the supraspinatus tendon is even and thin. The broad part of the supraspinatus tendon presents within normal limits for its shape, volume and echogenicity. Average maximum thickness of the left supraspinatus tendon is 7mm. There is no evidence of impingement. The attachment to the bone surface of the greater humeral tubercle is even and smooth. The infraspinatus muscle condenses and narrows down to a long tendon of even width, smooth outline and regular echogenic fibular echoarchitecture and up to the attachment to the bone surface of the humerus. There is no evidence of enlargement of the infraspinatus bursa.

FS

**AGE**

7 Years

Mild smooth exostosis is seen within the left bicipital groove. Mild anechoic effusion and mild generalized swelling of the bicipital synovium are noted as well.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

The visible margins of the shoulder joint are within normal limits.

**Right Shoulder**

**HOSPITAL NAME**

Stride Canine  
Rehabilitation &  
Fitness Center

Mild internal echoarchitectural remodeling of the right supraspinatus tendon is seen. The average maximum thickness of the right supraspinatus tendon is 7mm. There is no evidence of biceps impingement.

The biceps tendon presents moderate generalized swelling of its synovium with moderate anechoic tendon sheath effusion. Moderate semicircular osseous exostosis is seen within the bicipital groove. No echoarchitectural changes of the biceps tendon itself are seen.

**REFERRING VET**

Janice McConnell

Part of the medial glenohumeral ligament can be seen and presents smoothly delineated and continuous. The echogenicity of the visible part of the right medial glenohumeral ligament is subjectively high.

The infraspinatus muscle and tendon present within normal limits.

**INVOICE**

58995

**ULTRASONOGRAPHIC DIAGNOSIS**

- Moderate chronic right biceps tenosynovitis.
- Subjective mild increase in echogenicity of the visible part of the right medial glenohumeral ligament.

**DATE**

6-23-23



**PATIENT**

Rio Flanagan

- Mild left chronic biceps tenosynovitis.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The ultrasonographic study reveals bilateral chronic biceps tenosynovitis. The changes are moderate on the right and mild on the left hand side.

**SPECIES**

Canine

Presence of medial glenohumeral ligament injury of the right shoulder cannot be ruled out. The changes however may also reflect normal anatomic variant as well as uncomplicated fibrosis.

**BREED**

Golden Retriever

**SEX**

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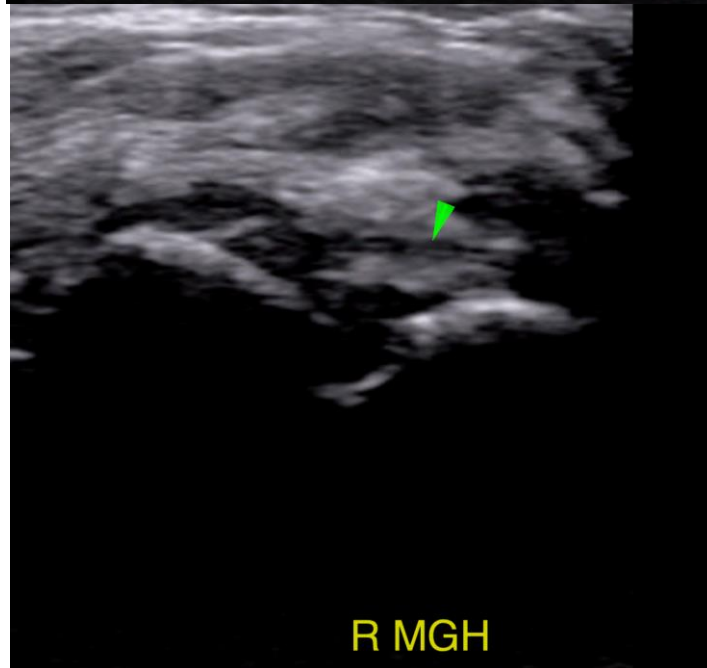
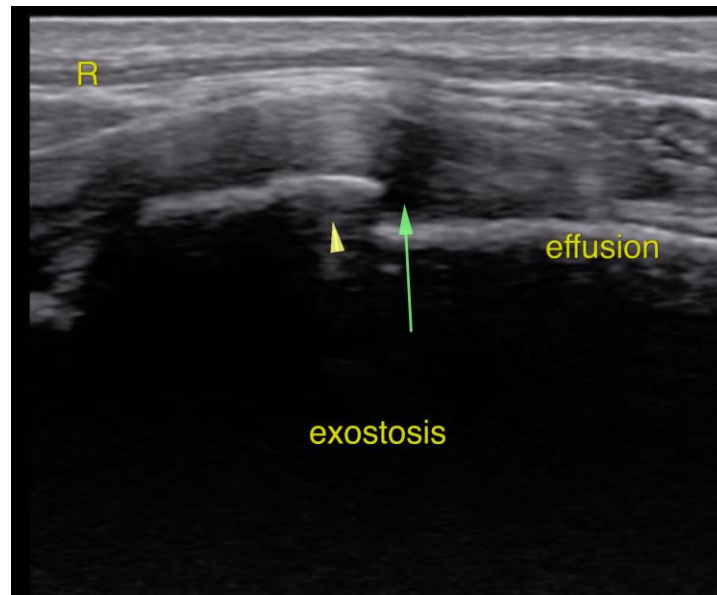
Janice McConnell

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**PATIENT**

Rio Flanagan

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.

**SPECIES**

Canine

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.

**BREED**

Golden Retriever

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**SEX**

FS

**AGE**

7 Years

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