



**PATIENT**

Charli Jacobs

**PRESENTING CLINICAL SIGNS**

Presented for ongoing lameness for the last 7-10 days. O reports P was out running around. Owner may have accidentally stepped on P's LH foot while he was out running around. Mild improvement in lameness since first noticing. Otherwise E/D/U/D normally

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: Grade I/IV lameness noted on LH, P very reactive to PE, sedation needed for Ortho exam. Ortho exam - no laxity, etc. Mild swelling on medial aspect of metatarsal-phalangeal joint, digit II.

**BREED**

Belgian Malinois

**RADIOGRAPHIC STUDY OF THE HIND PAWS**

Dorsoplantar view of the hind paws and mediolateral view of the left hind paw totaling 2 images available for review.

**SEX**

FS

**RADIOGRAPHIC FINDINGS**

Articular and periarticular soft tissue swelling is seen medial to the metatarsophalangeal joint of the 2<sup>nd</sup> digit in the left hind paw. There is a 2.5mm sized osseous fragment seen medial to the distal 2<sup>nd</sup> metatarsal bone with a concave fragment bed and mild mediolateral displacement. There is no evidence of subluxation or luxation. The joint space is of even width.

**AGE**

3.3 Years

Mild osseous remodeling of the mediolateral bone surface of the 2<sup>nd</sup> metatarsal bone is seen in the right hind paw.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**RADIOGRAPHIC DIAGNOSIS**

- Suspect avulsion fracture of the distal 2<sup>nd</sup> metatarsal bone in the left hind limb with metatarsophalangeal joint involvement.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**HOSPITAL NAME**

Boca Park Animal Hospital

The radiographic findings suggest traumatic osseous injury with a slab fragment at the mediolateral aspect of the 2<sup>nd</sup> metatarsal bone. Medial collateral ligament and articular involvement both are a potential. Presence of stability of the joint should be ensured clinically. Traumatic detachment is considered most likely however, separate ossification center and osseous metaplasia cannot be ruled out entirely.

**REFERRING VET**

Ashman

**INVOICE**

52790

**DATE**

7-10-22



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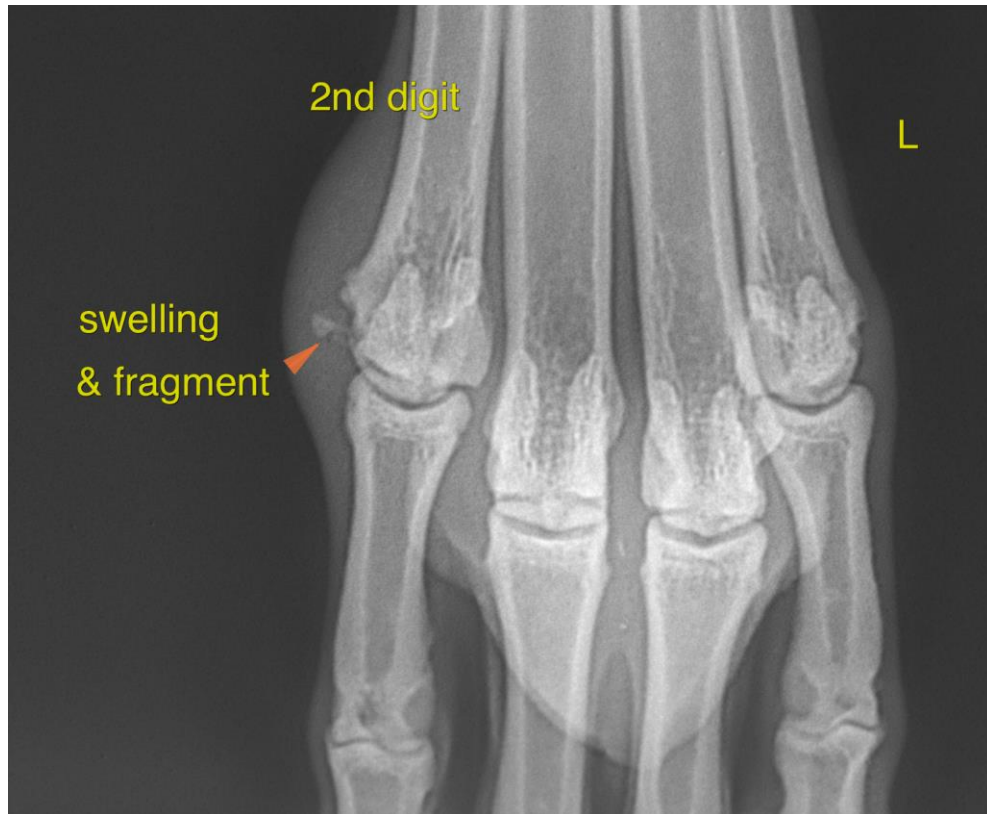
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Nele Eley**, DVM, Dr. med. vet., DipECVDI  
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,  
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology  
Nele.Eley@sonopath.com