

**PATIENT**

Flash Martin

PRESENTING CLINICAL SIGNS

Traumatic stick puncture wound to left proximal tibia 8m ago. It is uncertain if the wound penetrated the joint. There has been a continuous, persistent lameness since. On examination, there was non-painful thickening of the patellar tendon, and firm non-painful thickening of the tibial tuberosity where the tendon inserts.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS**Left Patella Tendon****BREED**

Husky X

The mid and distal third of the left patella tendon is thick with slightly ill-defined margins and partial loss of its echoarchitecture. The tendon is thickened to approximately three times its original depth and two times its origin width in the affected area. The changes start approximately 1.5 cm distal to the patella and extend up to the level of the insertion at the tibial tuberosity. Moderate new bone formation and concavities are seen in the outline of the tibial tuberosity. Occasional shadowing echogenic foci are seen within the altered patella tendon tissue. Mild remodeling of the surface of the patella is seen.

SEX

FS

ULTRASONOGRAPHIC DIAGNOSIS**AGE**

5 Years

- Chronic partial avulsion injury of the left patella tendon.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The ultrasonographic changes suggest presence of chronic partial rupture of the left patella tendon accentuating its mid and distal third with small avulsion fragments from the tibial tuberosity and significant osseous remodeling of the tibial tuberosity. Patella alta is not overtly seen, however, this requires correlation with the clinical palpation and radiographic findings. Based on the ultrasonographic changes, I do have the impression that there is incomplete loss of stability and no proximal displacement of the patella.

INTERPRETED BYNele Eley, DVM
Dr. med. Vet. DipECVDI**HOSPITAL NAME**Points East West
Veterinary Services**REFERRING VET**

David Lane

INVOICE

52916

DATE

7-16-22



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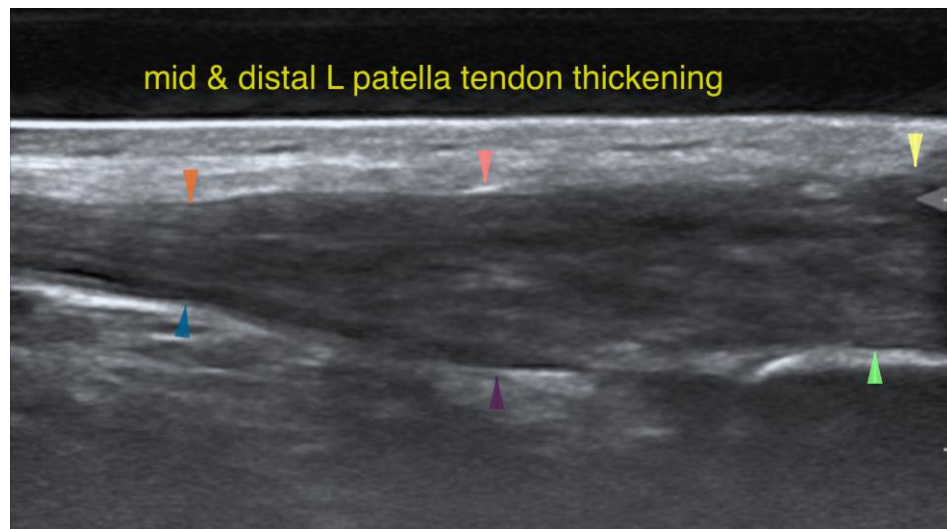
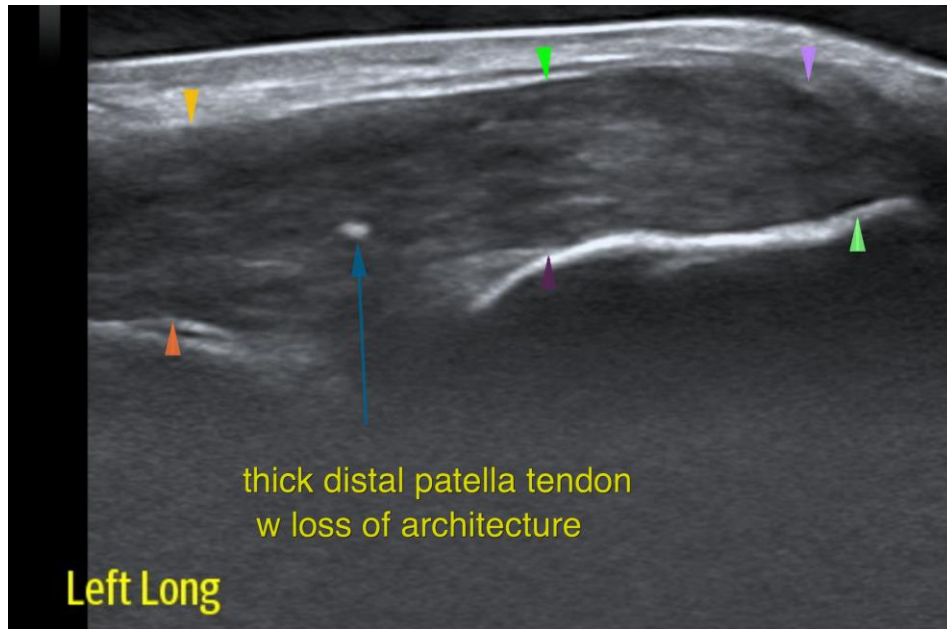
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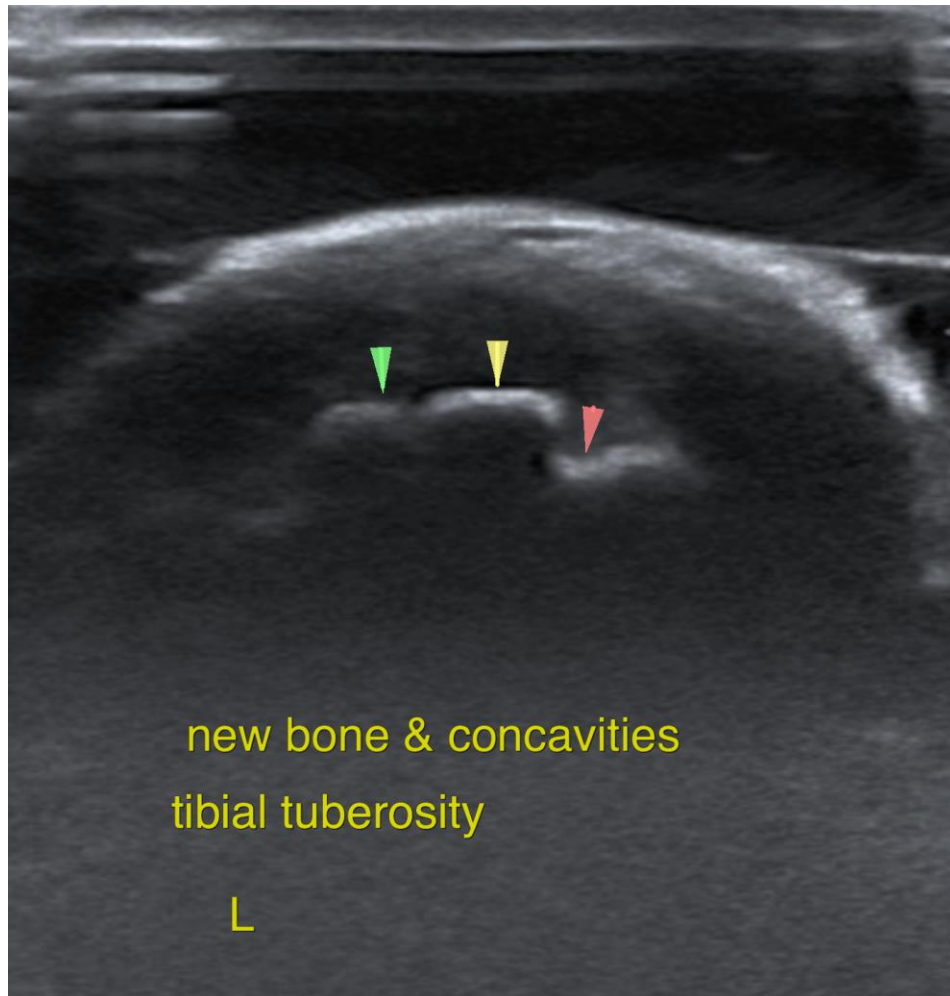
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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