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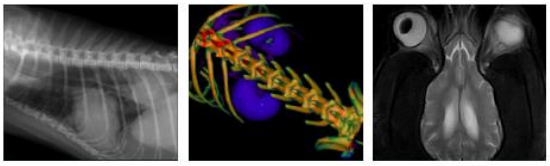


PATIENT

Roxie Phillips

SPECIES

Canine

BREED

Mixed Breed

SEX

FS

AGE

9 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Marina Village Veterinary & Integrative Care

REFERRING VET

Ashley McCaughan

INVOICE

59441

DATE

7-17-23

PRESENTING CLINICAL SIGNS

Roxie presents today by referral from her primary care veterinary acupuncturist for recheck lameness exam. Roxie received stem cell injections (autologous msc) 3 months ago into both hips and both stifles. She was doing well, but had a significant set back wherein her owner noted her skipping LH. Radiograph report (1/25/2021): R stifle OA and small joint mouse-changes; L stifle ccl enthesophytosis; hip dysplasia w/ mod to severe osteoarthritis - right more severe than left. Right lateralized lumbosacral chronic intervertebral disc disease. ultrasound of both stifles today to check if we can see any significant CCL injury or meniscal injury, as cause for recent setback in lameness.
Abnormal PE/Chem/CBC/UA Results: Grade 3/5 Lameness LH on moving (sniff) exam, worse on tight circles. RH grade 2/5 Lameness. When asked to stride forward, will break into bunny hop with both pelvic limbs instead of trot. No recent lab work, but 4/2023 labs CBC - nsf; ALT 141;

ULTRASONOGRAPHIC FINDINGS

Left Stifle

A moderate amount of periarticular osteophytes is seen in the suprapatellar region at the proximal margin of the femoral trochlea. The synovium presents moderate swelling. A moderate amount of anechoic effusion is seen within the supra- and infra-patellar recesses. There is moderate heterogeneity of the infrapatellar fat pad.

The cranial cruciate ligament presents continuous. Nevertheless, it appears swollen with slightly ill-defined margins and heterogeneous echoarchitecture. A hypoechoic halo is seen circumferential to the cranial cruciate ligament.

The medial and lateral menisci appear to be in situ, smoothly delineated and of uniform internal echoarchitecture.

Right Stifle

Mild to moderate osteophytosis, synovial swelling, and effusion are seen in the right stifle joint.

The right cranial cruciate ligament is not seen.

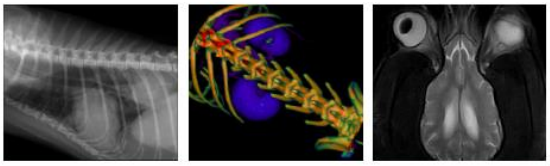
The right lateral and medial menisci present in situ and within normal limits.

ULTRASONOGRAPHIC DIAGNOSIS

- Moderate chronic left stifle arthropathy with crania cruciate ligament pathology.
- Mild to moderate chronic osteoarthritis of the right stifle joint.
- No evidence of meniscopathies.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A full rupture of the left cranial cruciate ligament is not present. Differential diagnosis for the ultrasonographic findings includes partial rupture and cruciate ligament edema. Fiber disruption is not overtly seen; however, early partial rupture and partial biomechanical failure is considered more likely based on the ultrasonographic findings than uncomplicated cruciate ligament edema.



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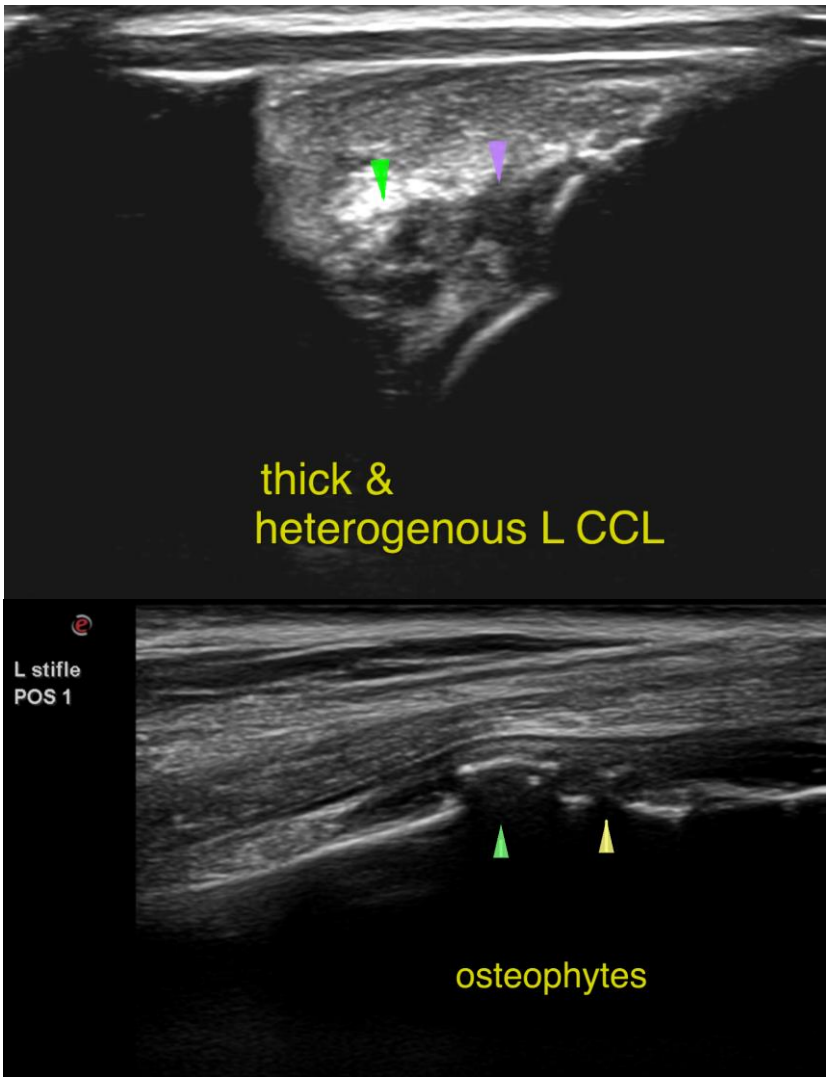
At this time, there is no evidence of concurrent meniscopathies.



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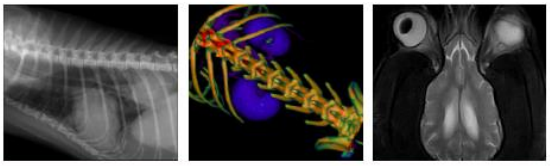

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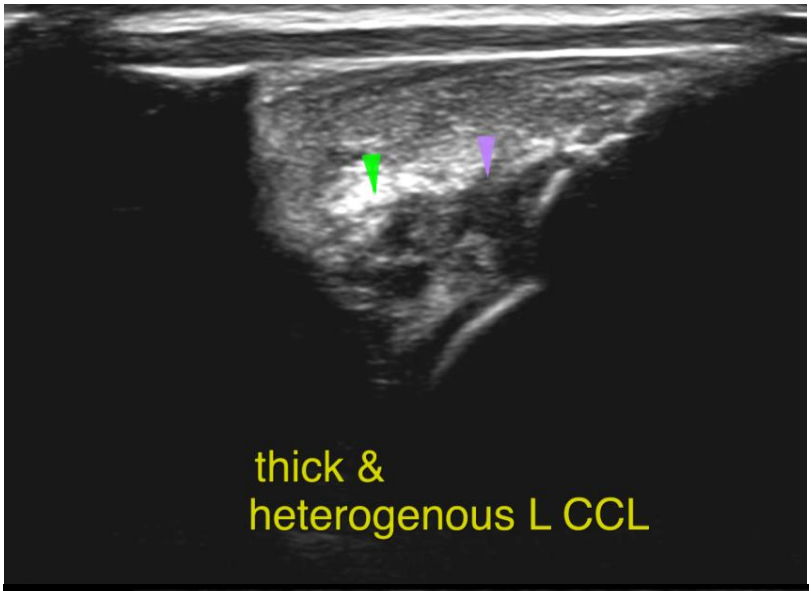

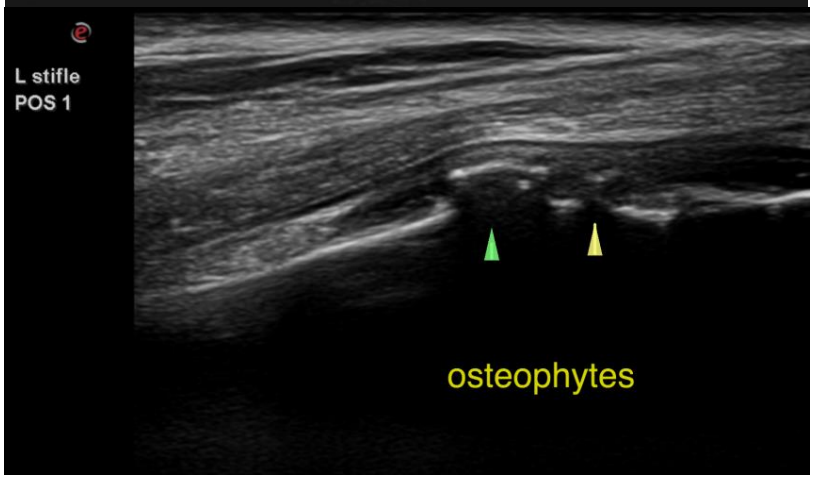

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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