

**PATIENT**

Akira La Torre

SPECIES

Canine

BREED

Czech Wolf Hybrid

SEX

F

AGE

2 Years

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

David Lane

INVOICE

53258

DATE

8-3-22

PRESENTING CLINICAL SIGNS

See prior report 47534. Based on examination findings, Akira was diagnosed with a C1-5 myelopathy that gives rise to a hypermetric and laterally circumducting forelimb gait, although MRI was negative (leaving the diagnosis open). We have concern about a foot origin lameness or gravelly terrain, but wanted to determine if the previously identified shoulder lesions had progressed, as recently Akira has demonstrated a RFL lameness. While under sedation, the descending pectoral muscles would not appropriately elongate to allow full forelimb extension.

ULTRASONOGRAPHIC STUDY OF THE SHOULDERS

Compared to prior study from September 2021 where bilateral supraspinatus tendinopathy with mild biceps impingement had been diagnosed.

ULTRASONOGRAPHIC FINDINGS

The ultrasonographic changes are stationary between the prior and recent studies. Both supraspinatus tendons measure between 8.5 and 9mm at maximum thickness on repeated measurements. Moderate remodeling with nonshadowing and partially shadowing echogenic areas and foci are seen within both supraspinatus tendons. There is mild impingement of the biceps tendons in both shoulders with mild generalized thickening of the bicipital synovium and a mild amount of anechoic fluid being visible within the bicipital tendon sheaths. No osseous changes of the intertubercular groove are noted in either of the shoulders.

I cannot delineate architectural abnormalities or volume changes within the right and left pectoralis muscles.

ULTRASONOGRAPHIC DIAGNOSIS

- Stationary bilateral supraspinatus tendinopathy with mild biceps impingement and mild bilateral biceps tenosynovitis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No ultrasonographic progression of the impinging supraspinatus tendinopathy with mild biceps tenosynovitis can be seen in the right or left shoulder. The changes deemed mild and clinical significance remains uncertain.

At this point, it appears very unlikely that the right front limb lameness demonstrated by the patient can be attributed to any of the changes in the shoulder.



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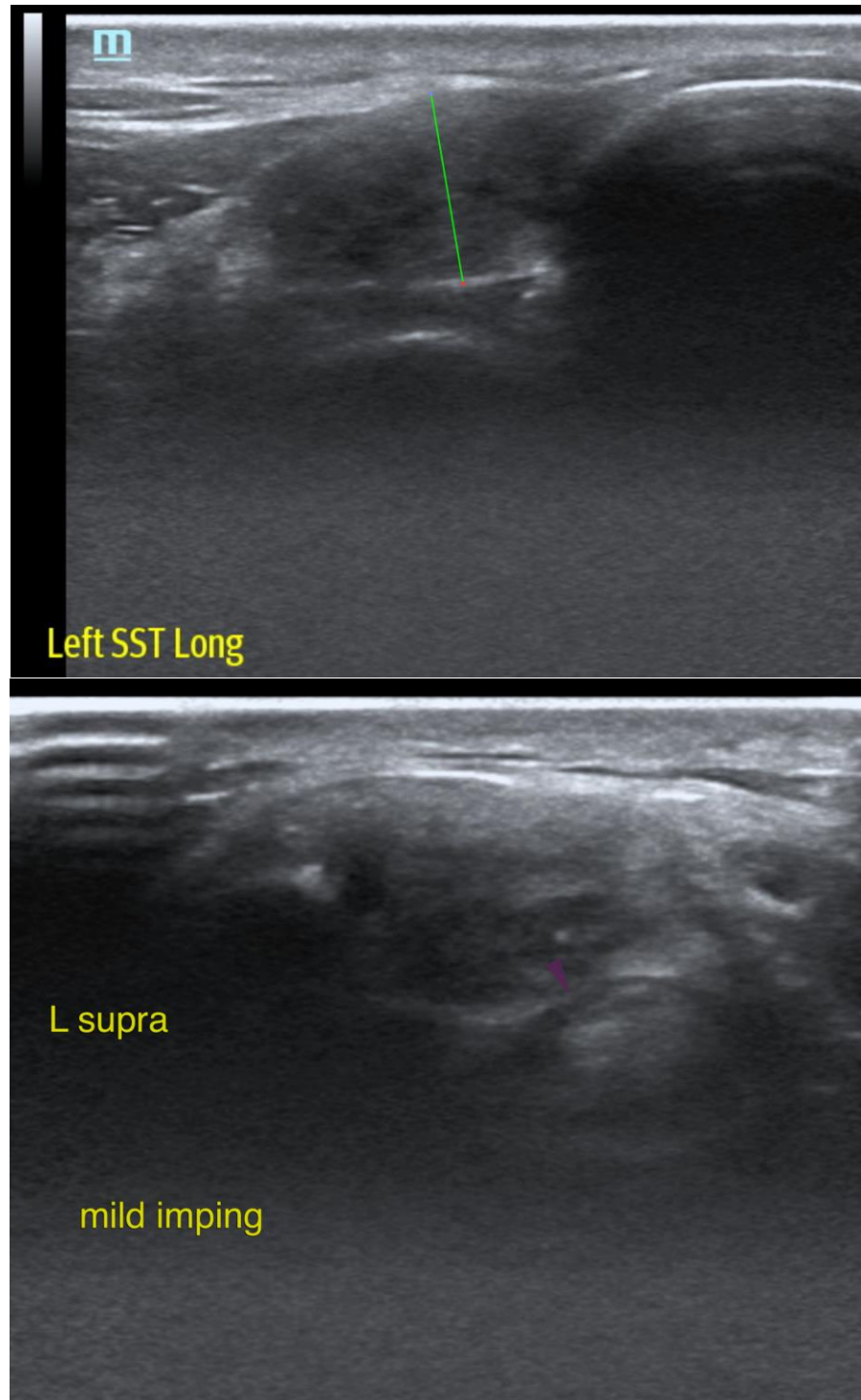
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
Nele.Eley@sonopath.com

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