



PATIENT

PRESENTING CLINICAL SIGNS

Guinness Thompson

Acute lameness 2 months ago to RF leg. Walking with dropped carpus now. Abnormal PE/Chem/CBC/UA Results: Swelling to medial and anterior right carpus, feels like some instability medially. Decreased flexion. Overweight Radiographs (rDVM)- no abnormal findings other than soft tissue swelling

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

Right Carpal Region

BREED

Giant Schnauzer

Moderate swelling of the synovium of the antebrachiocarpal and intercarpal joints is seen in the dorsal aspect. The intercarpal ligaments present swelling with loss of their echoarchitecture and ill-defined margins. There is osseous remodeling with mild smooth new bone formation of the periarticular margins in the dorsal aspect of the intercarpal joints.

SEX

MN

Marked swelling of the medial collateral ligaments with disrupted echoarchitecture and decreased echogenicity is seen.

AGE

4 Years

The accessory metacarpal ligament and flexor tendons are moderately swollen, ill-defined, and present partial loss of their echoarchitecture.

The ulnocarpal flexor tendon presents within normal limits.

ULTRASONOGRAPHIC DIAGNOSIS

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

- Complex soft tissue injury of the right carpus involving the synovium, dorsal and medial carpal ligaments, as well as the flexor tendons and the accessory metacarpal ligament.
- Early degenerative joint disease of the intercarpal joints.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Cedarview Animal
Hospital

The ultrasonographic findings suggest partial rupture of the medial collateral ligaments. There appears to be potential for partial rupture of the palmar and dorsal ligaments within the carpus. The findings furthermore support flexor tendon tendinitis and accessory metacarpal ligament tendinitis which is likely due to hyperextension trauma. The findings are more suggestive for partial rupture than for complete rupture. Presence of (partial) instability is likely. The treatment needs to be adjusted to the severity and extent of the hyperextension and instability and may range to conservative management, use of orthosis, and carpal arthrodesis.

REFERRING VET

Nigel Gumley

INVOICE

54217

DATE

9-22-22



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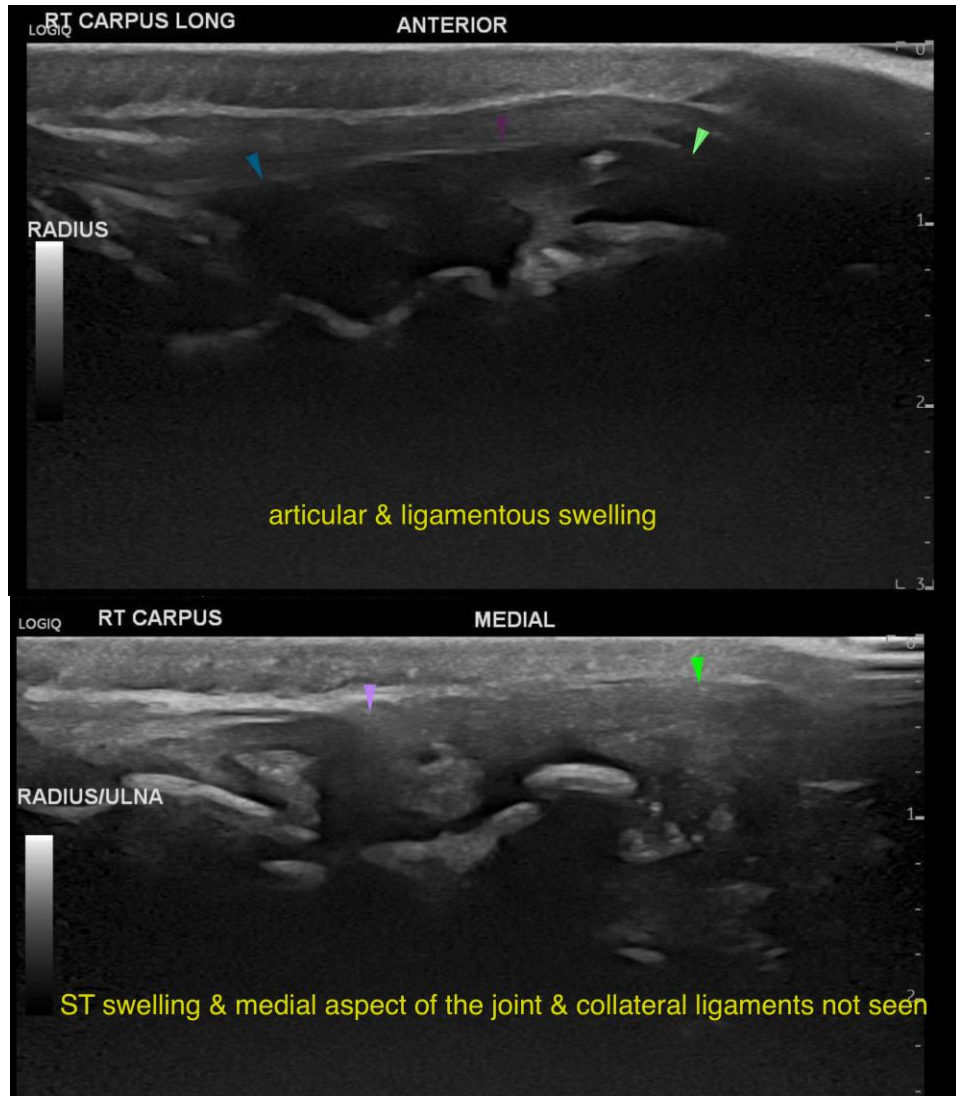
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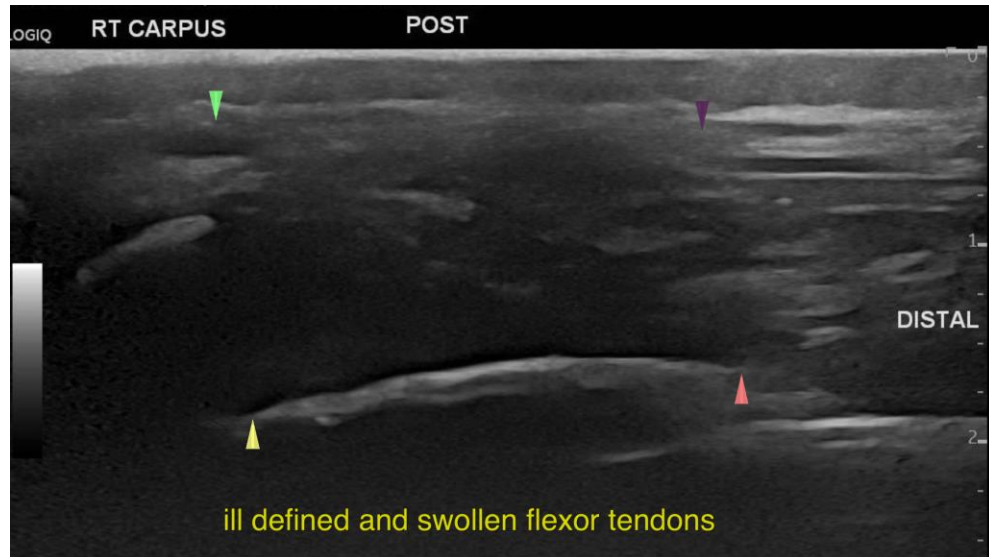
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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