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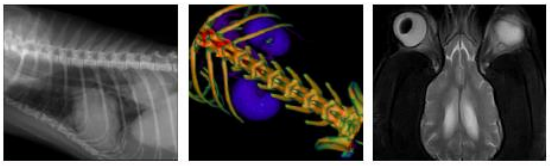

PATIENT

Gumbo Kim

SPECIES

Canine

BREED

Corgi

SEX

MN

AGE

6

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Animal Care Center of Castle Pines

REFERRING VET

Bartling

INVOICE

54374

DATE

9-29-22

PRESENTING CLINICAL SIGNS

Shoulder US today 4 mos LTL lameness with intermittent RTL lameness Mild elbow OA with possible FCP Possible small mineral at SUP insertion on xray LTL Moderate osteophyte R shoulder
Abnormal PE/Chem/CBC/UA Results: Aggressive patient - tough to interpret Stiff L biceps Stiff with ROM L elbow

ULTRASONOGRAPHIC FINDINGS

Right Shoulder

The right supraspinatus tendon measures 4.5mm in thickness. There is no evidence of biceps impingement. No significant echoarchitectural remodeling is seen. The biceps tendon presents uniform in echoarchitecture, well delineated with no significant synovial swelling or effusion. The intertubercular groove's bone surface is even and smooth. The infraspinatus and visible medial joint compartment present within normal limits.

Left Shoulder

The left supraspinatus presents moderate increase in thickness with average measurements between 6-6.5mm. Moderate echoarchitectural remodeling is seen accentuating the medial and distal part of the supraspinatus tendon with multiple nonshadowing echogenic foci and one shadowing echogenic focus of 1mm diameter. No biceps impingement is seen however, and the biceps tendon presents uniform internal echoarchitecture. It is smoothly delineated, and no significant effusion or synovial swelling is noted. The bone surface of the intertubercular groove is even and smooth. The infraspinatus presents within normal limits.

ULTRASONOGRAPHIC DIAGNOSIS

- Moderate left supraspinatus tendinopathy with fibrotic foci and early mineralization, no evidence of biceps impingement or concurrent biceps tenosynovitis.
- Normal ultrasonographic findings of the right shoulder.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The ultrasonographic study reveals significant moderate echoarchitectural remodeling as well as volume increase of the left supraspinatus tendon. However, at this time, there is no evidence of biceps impingement or concurrent biceps tenosynovitis (yet) and the clinical significance of the supraspinatus changes standing alone for themselves is uncertain even though not fully neglectable.

Images of the medial glenohumeral ligament of the left shoulder are not available so that shoulder instability remains a potential. The visible parts of the right medial glenohumeral ligament present within normal limits.

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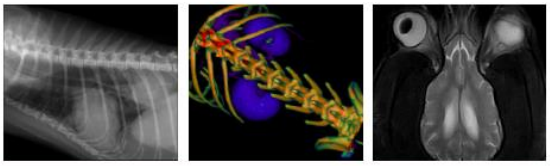

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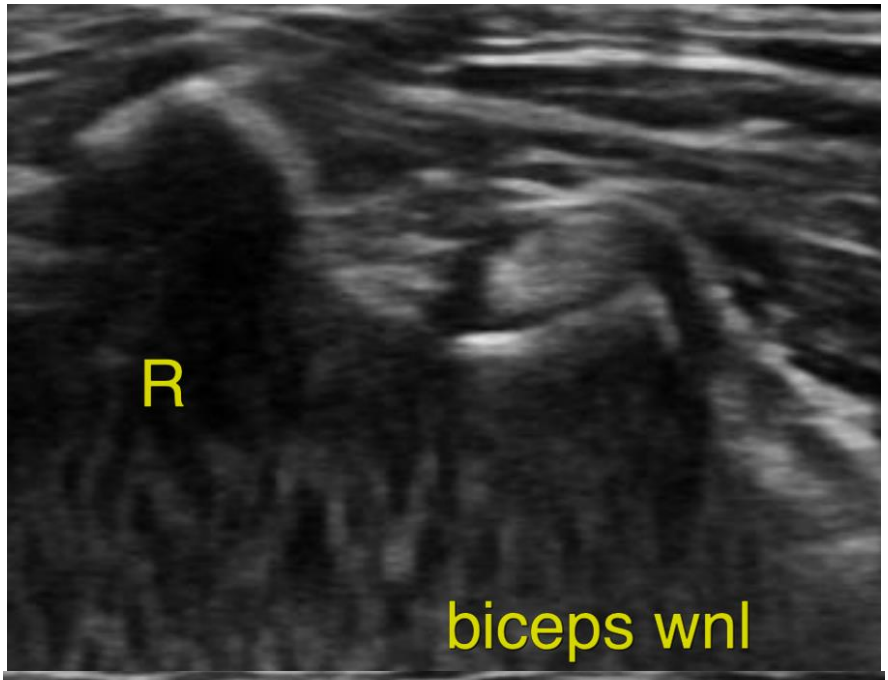

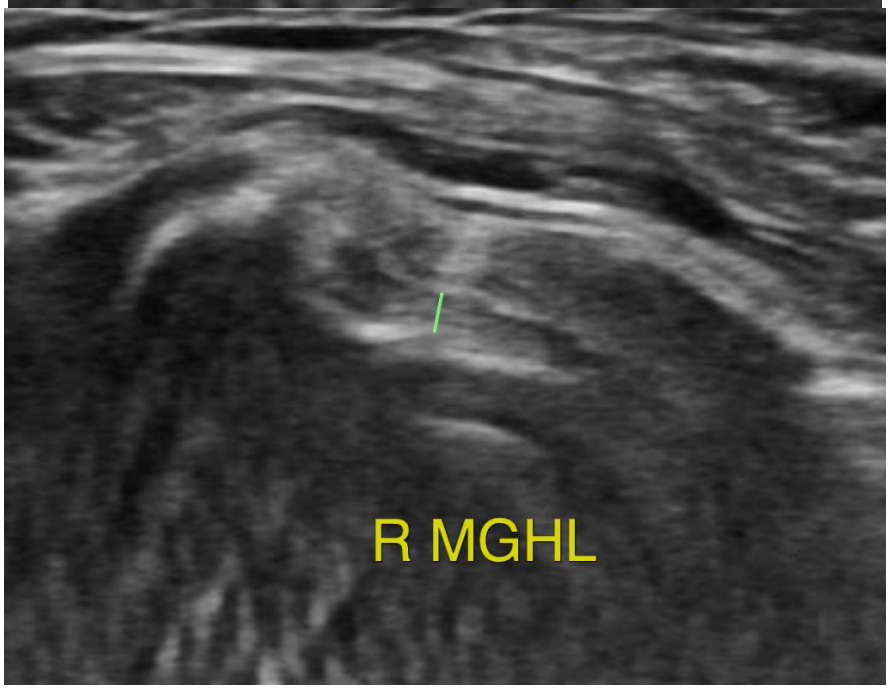

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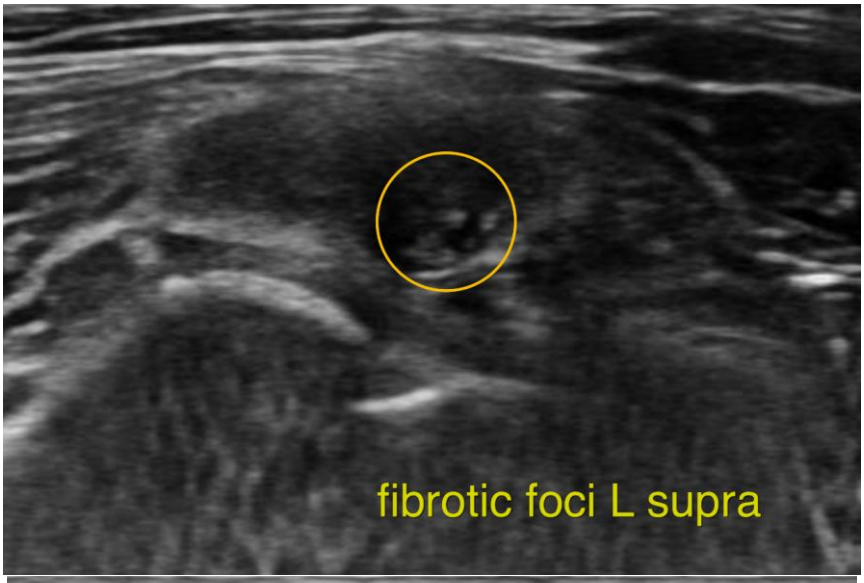

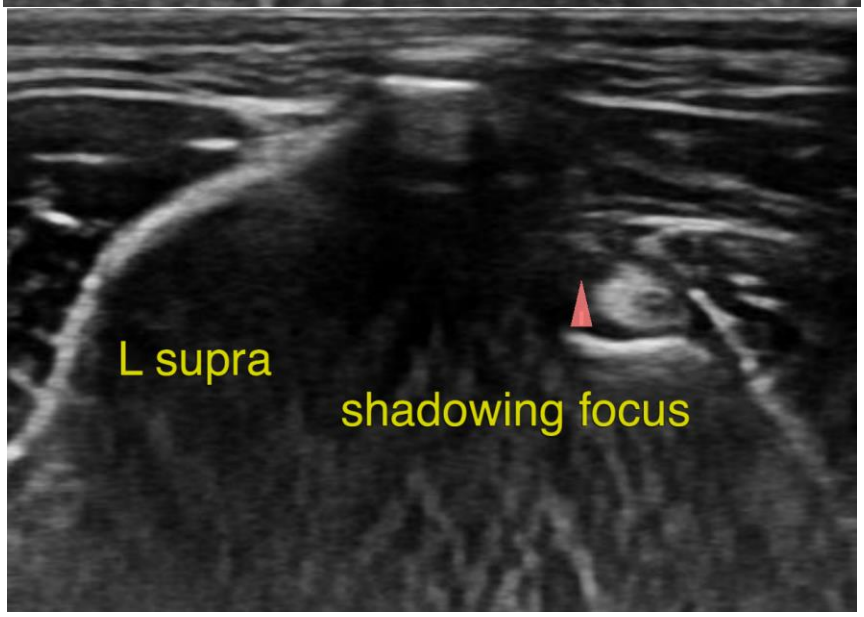

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
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