



PATIENT

Sumo Brome

SPECIES

Canine

BREED

Mixed

SEX

Spayed Female

AGE

6 Years

WEIGHT

38 kg

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet Specialist
in Diagnostic Imaging

IMAGING PERFORMED BY

Dr. David Lane

HOSPITAL NAME

Points East West
Veterinary Services

REFERRING VET

Dr. David Lane

INVOICE

13396

DATE

01/20/26

PRESENTING CLINICAL SIGNS

- Sumo has been diagnosed with shar-pei syndrome and bilateral elbow OA. There is a several months old RFL lameness that is easily provoked by exercise. Examination found pain on biceps tendon stretch on the right, but no current elbow pain. Both shoulders are stable.

ULTRASONOGRAPHIC FINDINGS

Right Shoulder

The right side presents subtle joint effusion and a hyperechoic stipple of 2 mm in the joint space beneath the biceps tendon. In this area, tissue-like structures are also recognized. The biceps tendon is seen in continuity without signs of a partial-/ rupture. The tendon itself appears homogeneous with very mild degenerative changes at the level of the bicipital groove. The MT transition is inconspicuous.

Left Shoulder

Changes on the left side are nearly similar to the right but less obvious. The left side also presents subtle joint effusion and a hyperechoic stipple beneath the biceps tendon again with tissue-like structures within the intra-articular joint space.

The infra- and supraspinatus tendons/insertions as well as the medial compartments of both shoulder joints are unremarkable.

ULTRASONOGRAPHIC DIAGNOSIS

- Bilateral subtle joint effusion with suspected intraarticular chip and synovial hyperplasia slightly more obvious right shoulder

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The sonographic findings are bilateral and subtle to mild, more prominent on the right than on the left side. The hyperechoic chip within the intraarticular space could be of chondral origin or represent a metaplastic calcification. I do not suspect a lesion of the biceps tendon, nor an impingement due to a supraspinatus lesion. The tissue-like structures beneath the biceps tendon likely could present synovial hyperplasia due to an ongoing or chronic improper load (see elbow disease). Another differential would be a chronic instability which was already ruled out clinically. Signs of an active inflammatory process as seen with tenosynovitis, tendinitis, and/or arthritis/synovitis are not recognized.



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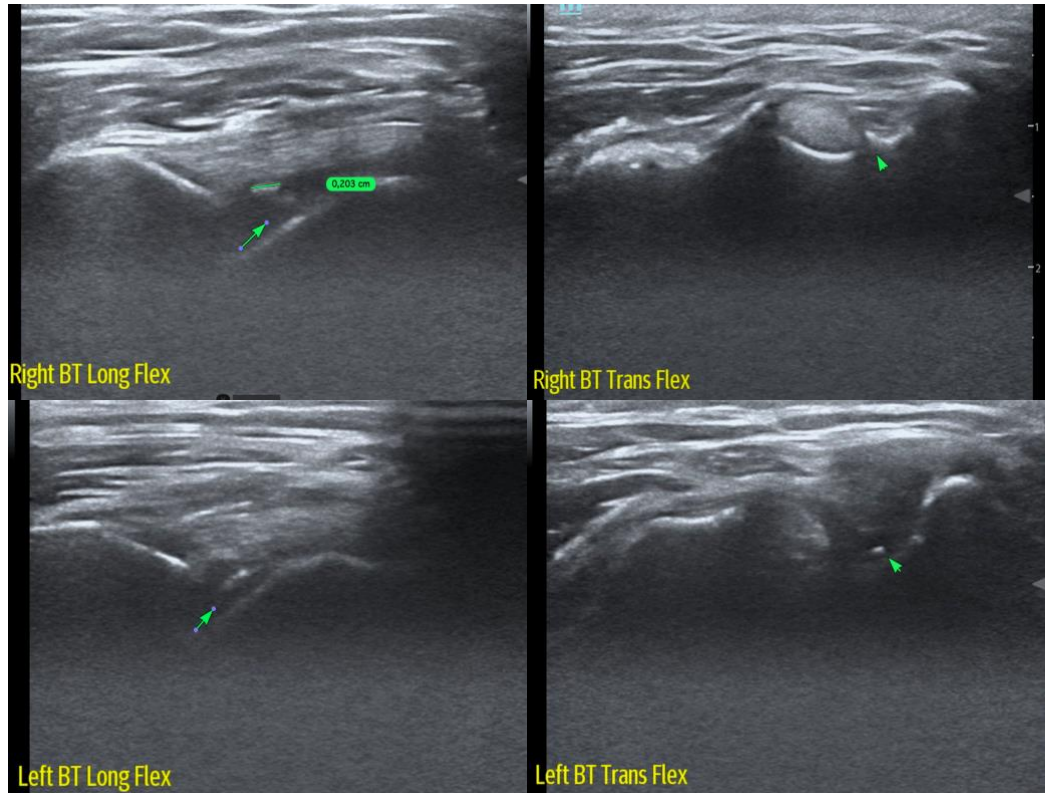
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Jawinski, German Board-Certified Vet Specialist in Diagnostic Imaging
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