

PATIENT

Trash Varney

SPECIES

Canine

BREED

Greyhound

SEX

Spayed Female

AGE

11

WEIGHT

25

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet Specialist
in Diagnostic Imaging

IMAGING PERFORMED BY

Dr. Patricia Sanchez-
Sanchez

HOSPITAL NAME

Animal Trust Bolton

REFERRING VET

Dr. Patricia Sanchez-
Sanchez

INVOICE

35709

DATE

11/28/25

PRESENTING CLINICAL SIGNS

History: Severe lameness in LFL.

COMPUTED TOMOGRAPHIC STUDY OF THE FORELIMBS

On the right side, moderate osteoarthritis is noted at the level of the metacarpophalangeal joints of the fifth and second toe. Relevant soft tissue swelling is not recognized. The displayed parts of the paws, metacarpal bones including the sesamoid bones and carpal joints are inconspicuous apart from mild degenerations (s. accessory carpal bones). There are no signs of a lytic/sclerotic process or soft tissue swelling. There is no evidence of a fracture or subluxation.

Both elbow joints look normal with well-defined bone surfaces and without signs of a fracture, sub-/luxation or an osteolytic/sclerotic process. The periarticular soft tissues are in expected normal limits.

The left major tubercle presents moderate metaplastic calcifications of the supraspinatus insertion with an indicated impingement of the biceps tendon. Both shoulder joints present a normal caudal humeral head apart from that. The right bicipital groove is inconspicuous with a normal origin and course of the biceps tendon. There is no overt evidence of joint effusion.

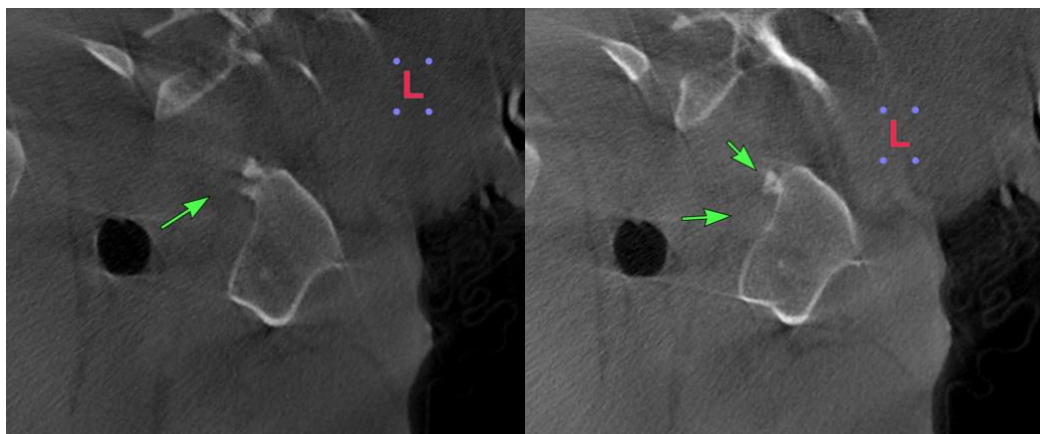
COMPUTED TOMOGRAPHIC DIAGNOSIS

- Moderate osteoarthritis metacarpophalangeal right 2nd + 5th toe
- Calcifying tendinopathy left supraspinatus

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings of the right metacarpophalangeal joints do not match with the reported side of lameness. These findings are consistent with chronic and degenerative joint disease and do not show signs of an active inflammatory process and/or an acute onset. Activated arthritis/synovitis are potential differentials. CT would miss instabilities, especially of the distal parts of the forelimbs due to soft tissue lesions.

The metaplastic calcifications of the supraspinatus insertion on the left side again are probably chronic and degenerative findings. Inflammation of the insertion and/or avulsion fragments are not fully excluded and could impinge the biceps tendon as a cause of lameness. With that, a complementary ultrasound of the left shoulder joint could be performed next.





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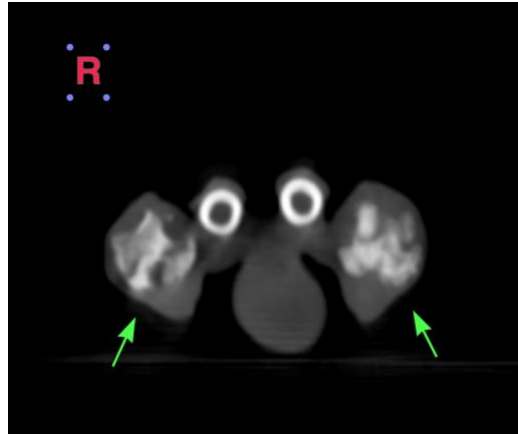
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
info@sonopath.com