



**PATIENT**

Eli Capotosto

**SPECIES**

Canine

**BREED**

Potcake

**SEX**

M

**AGE**

1 Year

**INTERPRETED BY**

Sebastian Jawinski,  
German Board  
Certified Vet  
Specialist in  
Diagnostic Imaging

**HOSPITAL NAME**

Animal Health  
Partners

**REFERRING VET**

Dr. Jeffery Biskup

**INVOICE**

49997

**DATE**

2-1-22

**PRESENTING CLINICAL SIGNS**

Eli, a 1 old Male Potcake, was presented for evaluation of bilateral elbow dysplasia. The dysplasia was initially noticed 6 months ago when lameness was observed. The lameness has since been intermittent and worsens after exercise. Lameness has improved within the last two months after Eli was started on fourcyt. Eli is energetic; he still takes long walks and is very active. normal EDUD; No VDSC.

Abnormal PE/Chem/CBC/UA Results: left forelimb lameness at a walk lameness left muscle atrophy Bilateral pain on elbow flexion and intenral rotation, worse on the left noted on initial exam. on day of imaging forelimbs: No digital crepitus or pain. No carpal effusion, normal range of motion. Full range of motion of elbow, no pain on coronoid palpation.

**COMPUTED TOMOGRAPHIC FINDINGS**

Left elbow:

The radioulnar joint space is markedly incongruent. There are no osteophytic changes noted. The subchondral bone of the trochlea shows mild sclerosis. The tip of the medial coronoid process is irregular and presents small fragments. The bone density of the coronoid process is mildly increased. The periarticular soft tissue is unremarkable.

Right elbow:

The right elbow shows subtle incongruity of the radioulnar joint space. There are no osteophytic changes noted. The subchondral bone of the trochlea is inconspicuous. The medial coronoid process presents a mildly irregular cranial contour with marked sclerosis of the coronoid process. Signs of a fissure or fragmentation are not recognized. The periarticular soft tissue is unremarkable.

The displayed long bones are unremarkable.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Lesion of the right medial coronoid process with marked sclerosis without signs of a fissure/fragmentation
- Fragmented left medial coronoid process with significant radioulnar incongruity

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

CT findings of the elbow joints do reflect the reported patient's history and are consistent with canine elbow dysplasia. Regarding the clinical presentation surgery should be considered (coronoidectomy, beginning with the left elbow). A kissing lesion of the left trochlea cannot be excluded. Please R/O OCD of the caudal humeral head prior to surgery.



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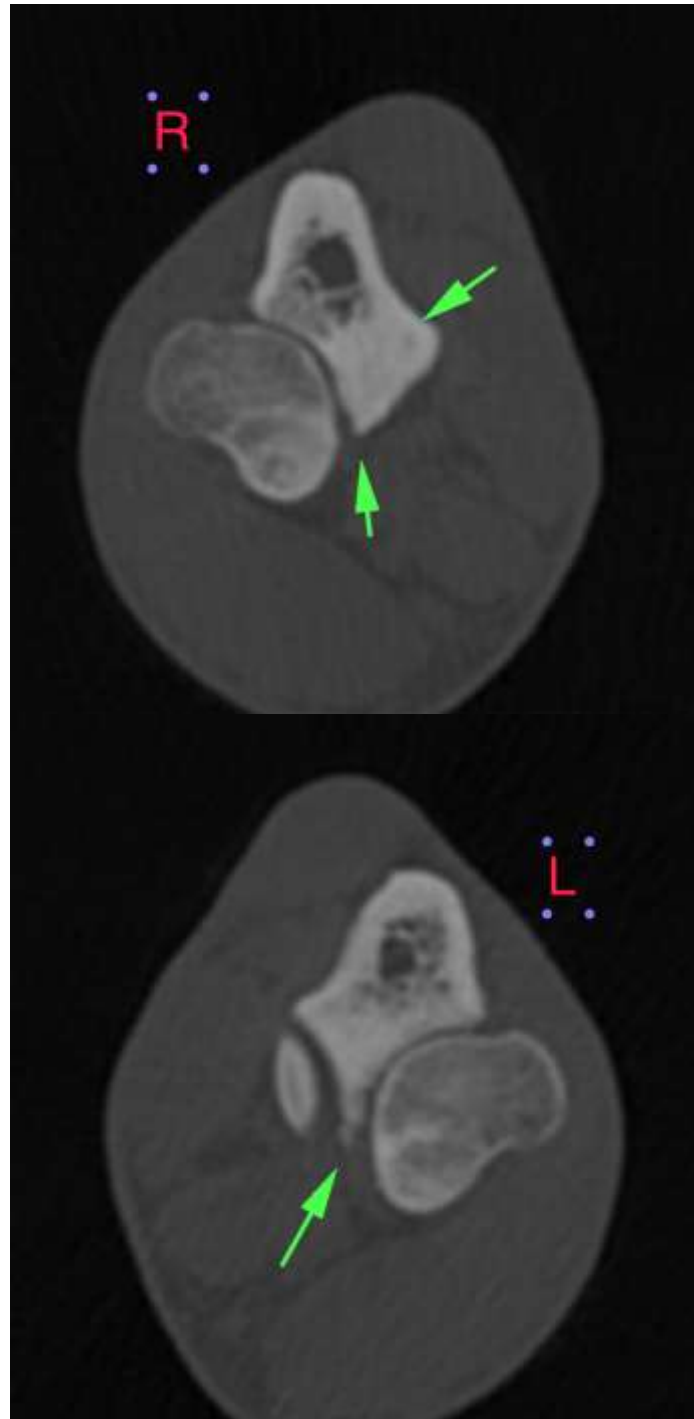
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

Canine

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**  
Sebastian.Jawinski@sonopath.com

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