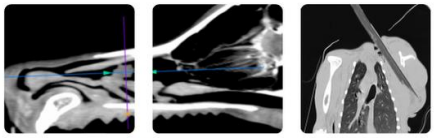

PATIENT

Cowboy Ryan Strunk Proudley

SPECIES

Canine

BREED

Boston Terrier Mix

SEX

MN

AGE

1Y, 6M

WEIGHT

26.8

INTERPRETED BY

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging

IMAGING PERFORMED BY

Cathy Bond

HOSPITAL NAME

Pocono Peak Veterinary Center

REFERRING VET

Dr. Amber Mattson

INVOICE

75256

DATE

6-2-26

PRESENTING CLINICAL SIGNS

Intermittent limping RH. Initially not favoring any limbs, then after PE slightly favoring RH limb; toe touching. Unable to luxate patella's bilaterally; both NR. ROM and palpation of joints and long bones all 4 limbs NR. Possible discomfort of R stifle, but no obvious laxity.

RADIOGRAPH OF THE PELVIS & STIFLES

Pelvis

The bony structures of the pelvis are inconspicuous. There is a bilateral dysplastic coxofemoral joint noted with a horizontally terminating joint space, mild osteophytic reactions on the right side at the acetabular rim and at the level of the femoral head and neck on both sides. The angles of Norberg show approximately 96 degrees on both sides.

The displayed long bones are inconspicuous.

Stifles

Both stifles show a partially fused apophysis of the tibial tuberosity. The patella is bilaterally inconspicuous. Both joint spaces present a subtly enlarged density without relevant displacement of the infrapatellar fat body. Signs of an aggressive lesion, a fracture or subluxation are not recognized.

RADIOGRAPHIC DIAGNOSIS

- Right-pronounced hip dysplasia with mild secondary osteoarthritic changes
- Normal variant tibial tuberosity with a partially fused apophysis both sides

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The images of the coxofemoral joints present moderate hip dysplasia on both sides with mild secondary osteoarthritic changes on the right side. These would match with the reported side of lameness. The findings of both stifles are bilaterally and of questionable clinical relevance. The partially fused apophysis does not show reactive or inflammatory signs. An avulsion lesion or others like M. Osgood-Schlatter are very unlikely. The mildly enlarged density within the joint space is within normal limits. Intraarticular lesions are unlikely with that but not fully excluded. Inflammatory changes of the surrounding tissues, for example the insertion of the gastrocnemius muscles, are still possible.

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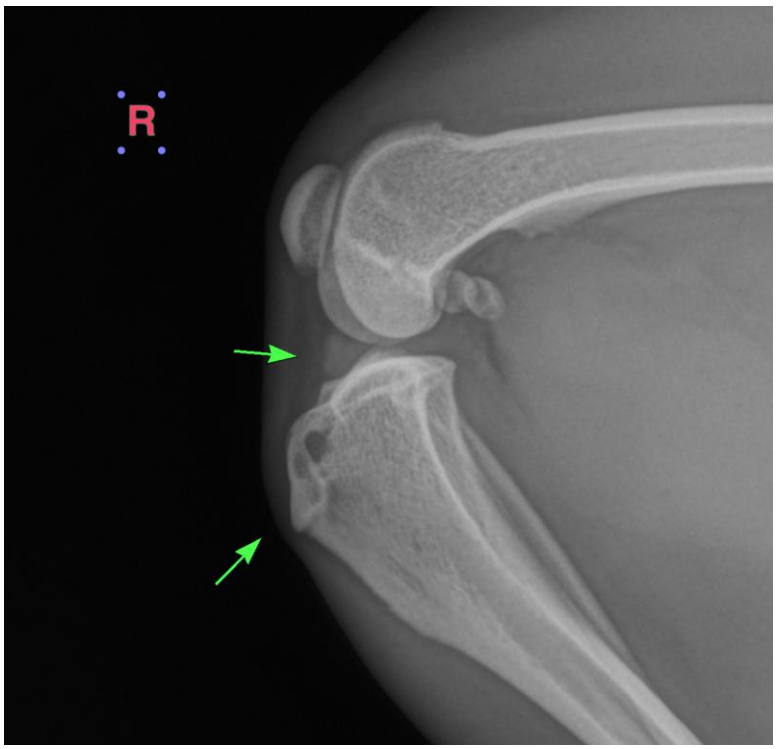

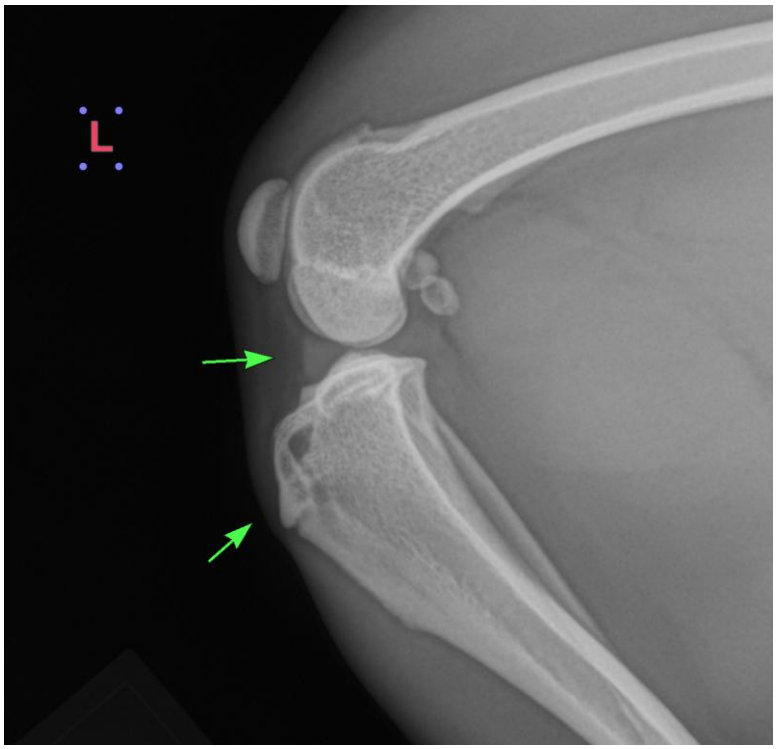

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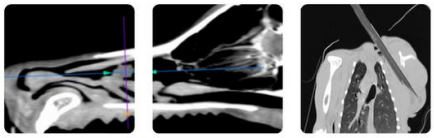

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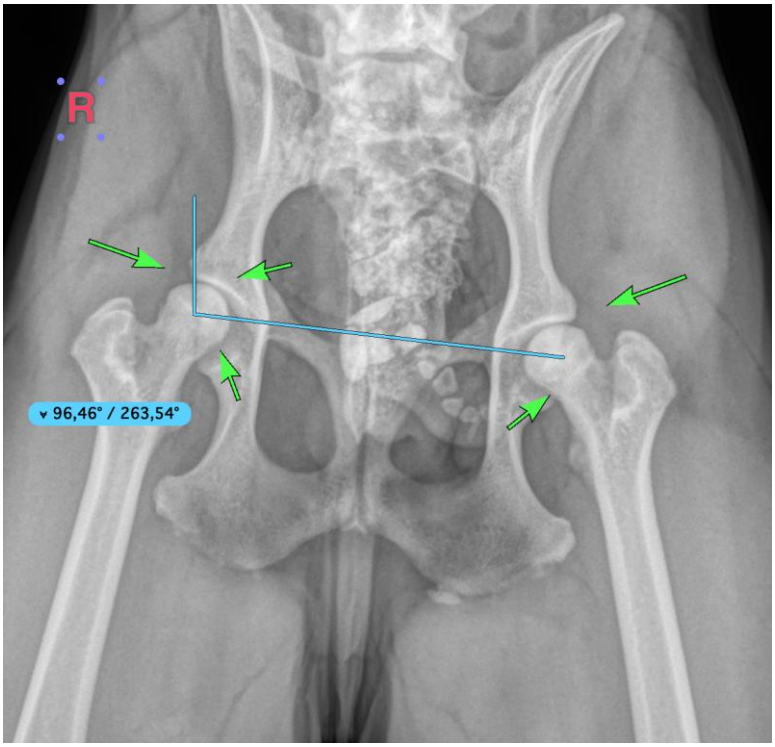

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
info@sonopath.com