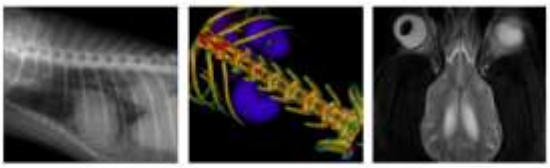
SonoPath Teleradiology

EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Lyla Vicky Autism Service Dogs

SPECIES

Canine

BREED

Lab

SEX

M

AGE

7 Months

INTERPRETED BY

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging

HOSPITAL NAME

Animal Health Partners

REFERRING VET

Dr. Jeffery Biskup

INVOICE

47112

DATE

8-24-21

PRESENTING CLINICAL SIGNS

-a couple months ago right front paw was rolled over by a chair -a couple months before then had an unknown trauma on the left front limb -a couple weeks ago was noticed to be limping again -metacam does help
Abnormal PE/Chem/CBC/UA Results: left elbow discomfrt on extension and medial palpation slight decreased flexion and internal roatation is forced on full flexion bilateral ortalni's under sedation

COMPUTED TOMOGRAPHIC FINDINGS

Left elbow:

The left elbow joint shows a large mineralized an irregular “fragment” adjacent to the medial epicondyle measuring 2.1 cm. The latter presents correspondent defects of its bony margination with some new bone formation and marked sclerosis. The medial aspects of the joint reveal prominent soft tissue swelling. The radioulnar joint space is mildly incongruent. The subchondral bone especially of the trochlea is inconspicuous. The tip of the medial coronoid process is irregular with increased sclerosis and prominent alternations of the bone density again presenting mild osteophytes.

Right elbow:

The bony surfaces are well marginated without relevant signs of osteophytes. Signs of a fracture/lytic lesion are missing. The tip of the medial coronoid process is rounded and smooth and presents an increased sclerosis without evidence of a fragmentation and/or a fissure line. The subchondral surface of the trochlea is inconspicuous. The periarticular soft tissues are unremarkable.

Displayed parts of the head and cervical spine are inconspicuous as far as can be assessed.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Avulsion fracture of the left medial epicondyle with soft tissue swelling and lesion of the medial coronoid process with moderate degenerative joint disease
- Mild sclerosis of the right medial coronoid process

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT findings of the left elbow joint are most likely relevant. An avulsion of the flexor muscles is likely, secondary metaplastic calcification of the fragment with enlargement of the latter is possible. The peripheral soft tissue swelling represents an active/reactive process (synovial thickening, enthesopathy). A fracture of the epicondyle itself is not noted although there is marked sclerosis in the transition to the humeral diaphysis recognized. The medial coronoid is

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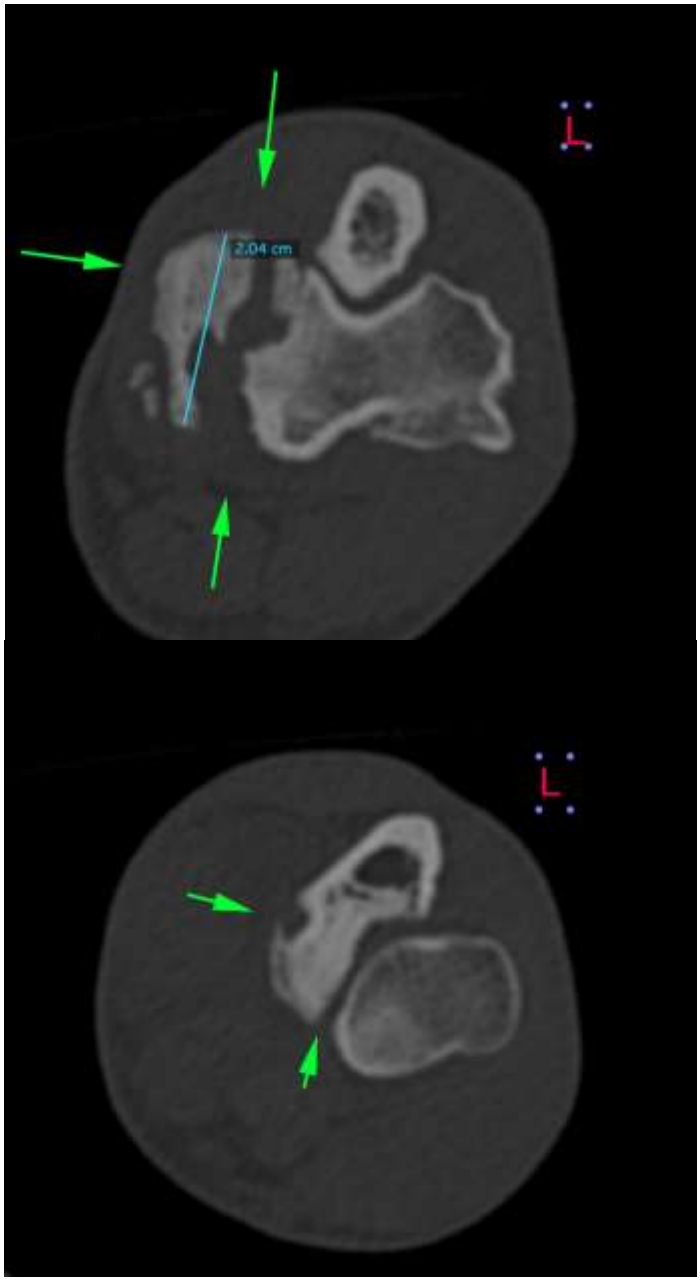
affected, a differentiation of a congenital change as seen with canine elbow dysplasia and a traumatic lesion is not possible. Surgery (coronoidectomy) should be discussed, especially to evaluate the joint space. Repositioning of the medial epicondyle I assume is not possible.

The right elbow indicates an initial coronoid lesion, currently without signs of a fragmentation/fissure or secondary arthrosis.



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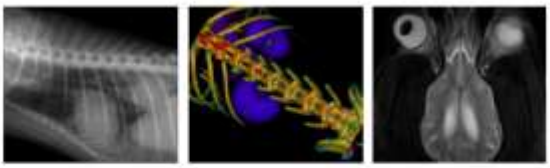

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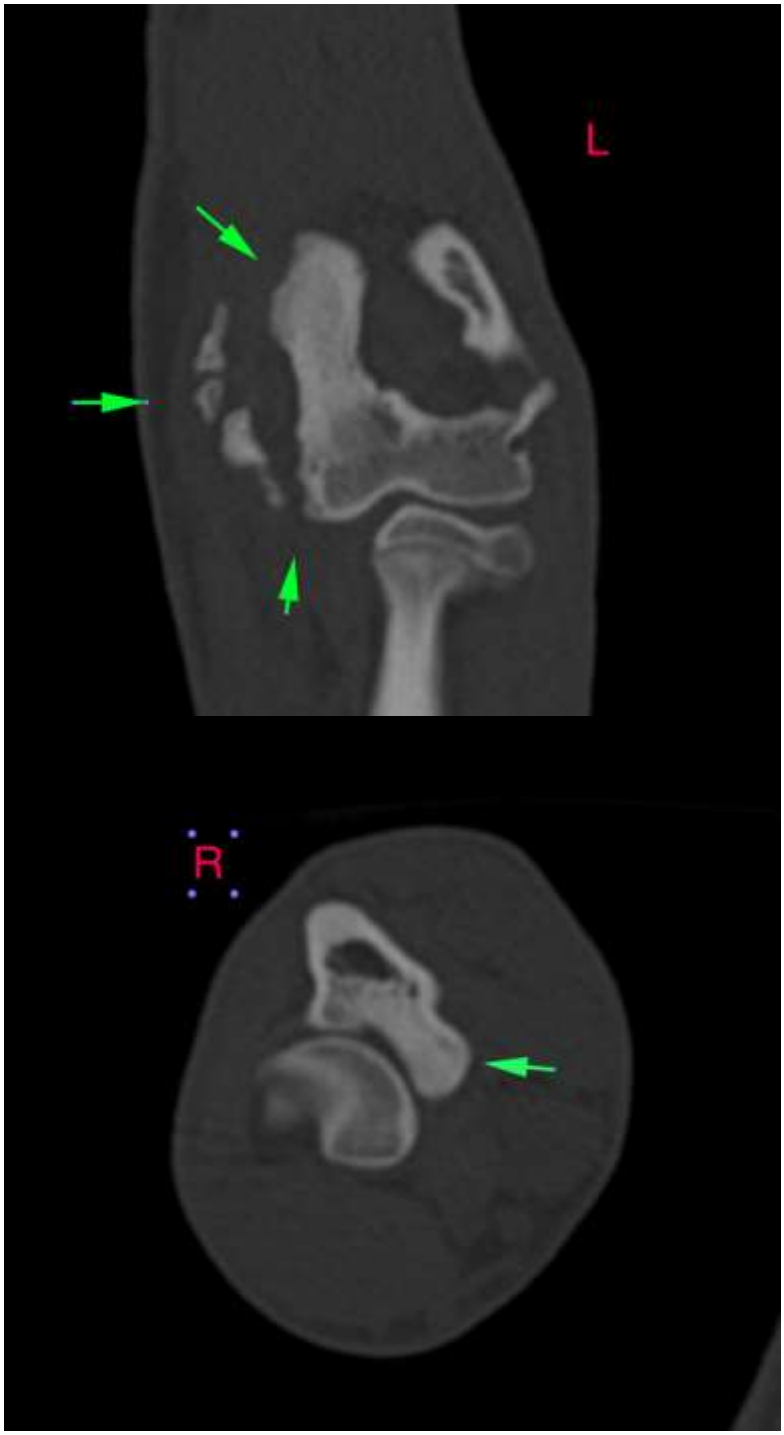

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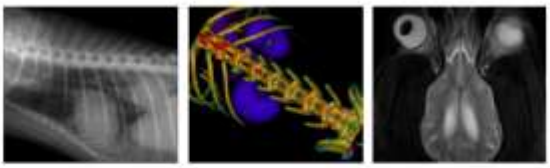

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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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