



PATIENT

Bartley Kimball

PRESENTING CLINICAL SIGNS

Sudden onset of left hind limb swelling from stifle and distal. Mild lameness present, no clear pain noted on manipulation of limb. No wounds noted on skin. Pet had TPLO procedure 5/2018. No fever, normal lymphnode palpation.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: CBC/Chemistries are normal

RADIOGRAPHIC STUDY OF THE LEFT STIFLE JOINT

Radiographs of the left stifle joint in two imaging planes are provided for review.

BREED

Labrador Retriever

RADIOGRAPHIC FINDINGS

The periarticular bones of the stifle joint present moderate osteophyte new bone formation. A moderate to marked intracapsular soft tissue swelling of the left stifle joint is seen, effacing the infrapatellar fat-pad cranially and distorting the fascial plane caudally. A TPLO implant is seen at the medial aspect of the proximal segment of the tibia, the osteotomy is completely filled with trabecular bone. A thin radiolucent rim is seen between the distal segment of the TPLO plate and the cortex of the tibia. There is a soft tissue swelling overlying the TPLO implant.

SEX

Male Neutered

Especially level with the hock and metatarsal region, a moderate circumferential soft tissue swelling is present.

AGE

8 Years, 5 Months

RADIOGRAPHIC DIAGNOSIS

- History of TPLO due to failure of the cranial cruciate ligament left stifle joint, the osteotomy is in the remodeling phase
- Potential mild lytic lesion under TPLO implant
- Moderate to marked articular swelling left stifle joint
- Circumferential extracapsular soft tissue swelling level with the left hock and metatarsal region
- Moderate degenerative osteoarthritis left stifle joint

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

All Creatures Animal
Hospital of South Hill,
Inc.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the swelling level with the TPLO implant and the radiolucent rim between the plate and bone, the odds for implant infection are considered high. Complementing blood work by crp can support the diagnosis of primary inflammatory origin of the swelling. Other potentials for the swelling include lymphedema, vasculitis, trauma, insect bite, neoplasia (e.g., mast cell tumor). Ultrasound of the TPLO implant can be used to check for evidence of local fluid pockets, complementing workup by FNA sampling might be beneficial as well. If there is evidence of underlying infection, implant removal should be considered.

REFERRING VET

Dr. Salmon

INVOICE

47946

The joint effusion of the left stifle joint is likely degenerative, however a synovial tap can be performed to rule out inflammatory arthritis.

DATE

10-23-21



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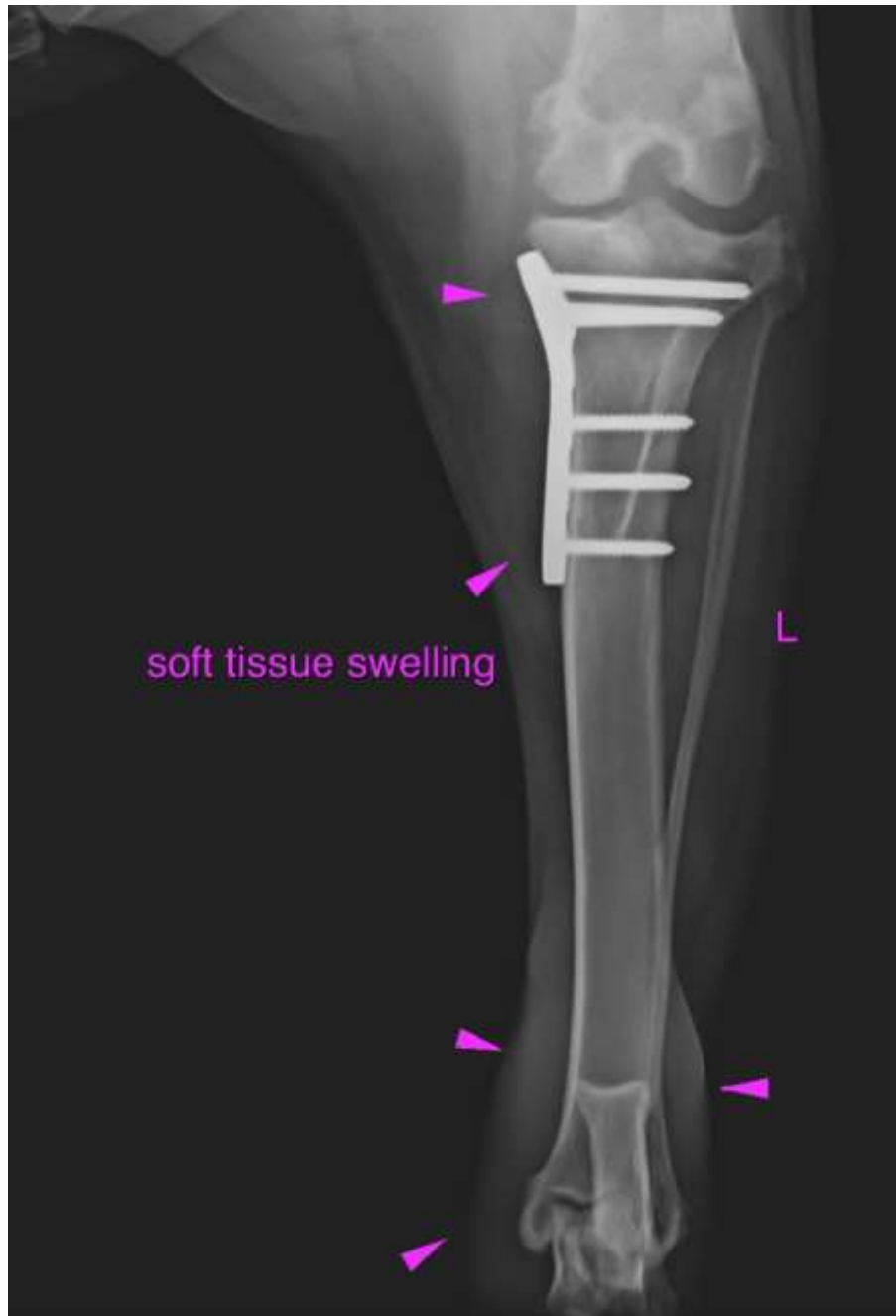
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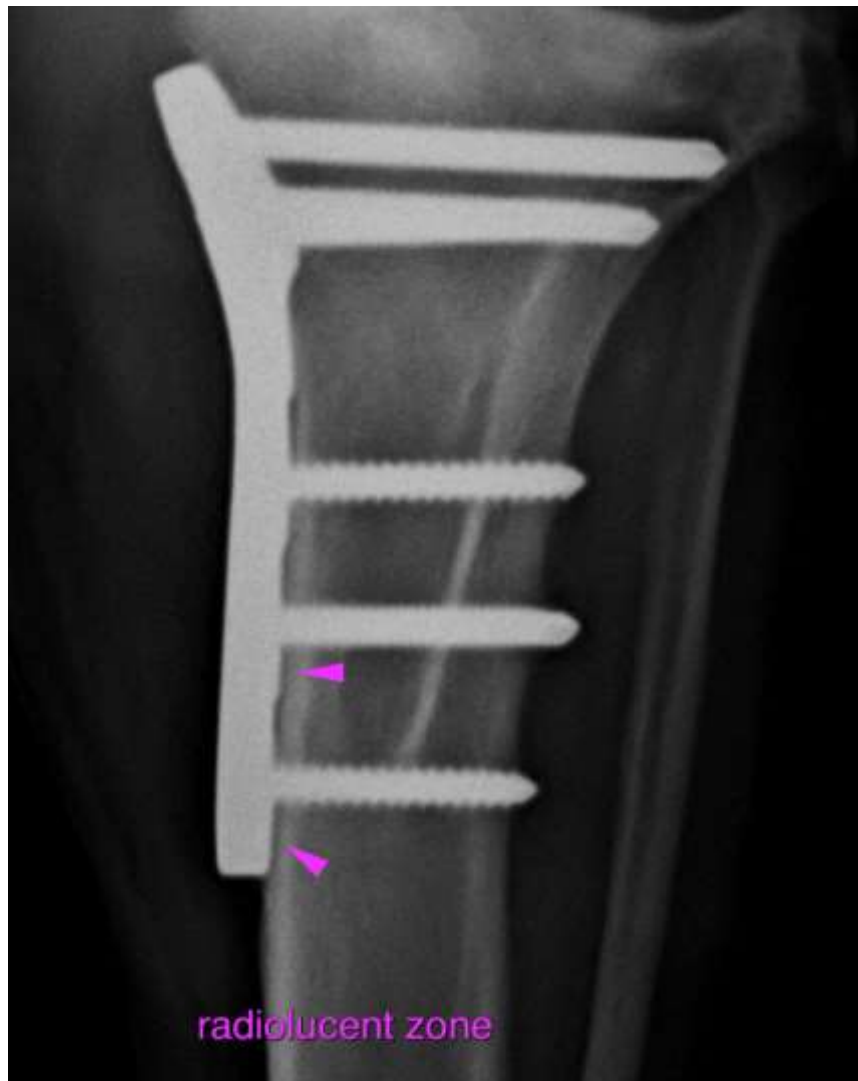
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
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