

PATIENT

Lulu Snyder

SPECIES

K9

BREED

French Bulldog

SEX

Female Spayed

AGE

10Y

WEIGHT

26lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

ERG

HOSPITAL NAME

DTLAvets

REFERRING VET

Dr. Castaneda

INVOICE

72603

DATE

11-12-25

PRESENTING CLINICAL SIGNS

Lulu presents today to establish care and for ER follow-up from Sunday. O reports she was seen at AUC K-town for severe vomiting and diarrhea. She received fluids, pain meds, and anti-nausea treatment. Fecal was negative for parasites, but WBC was low. O requests exam of L arm (site of prior mast cell tumor removal) and anus (appears raw from diarrhea). Hx: Arthritis, mast cell tumors, dry eye, periodontal dz, chronic otitis, poultry allergy. EDUD normal; no C/S; V/D resolved (vomiting stopped Sun). Drinking OK; energy low ~5d. Diet: Farmer's Dog turkey, pork, beef BID. Meds: Gabapentin, Metronidazole, Sucralfate, Tacrolimus. Preventatives: Credelio 4. PE: BAR; BCS 6/9. OS corneal scar, ventral pigment; OD WNL. Ears clean. Oral mild tartar, gingivitis, wart-like mass 108. Skin: 3 small nonpainful masses, alopecia at R shoulder. LN WNL. CV: reg, no murmur. MSK: amb x4, R stifle "thunk" on ROM, no drawer. GI, UG, Resp, Neuro WNL. Baseline rads taken today --Hx: hindlimb discomfort; previous hx of urinary leakage suspected to be secondary to OA (w previous rDVM) and which resolved w Carprofen therapy; today on PE P is ambulatory without lameness (P currently on Gabapentin) and no pain on ROM of hips or knees including negative drawer/thrust on awake exam however during ROM of R knee there is a consistent "thunk" that is apart from the patellar laxity; baseline rads are submitted today (rads never taken previous per O - today is the first visit with us)

RADIOGRAPHIC STUDY OF THE PELVIS AND STIFLE JOINTS

A complete set of radiographs of the pelvis and stifle joints is provided for review.

RADIOGRAPHIC FINDINGS

The vertebral endplates L6/L7 and L7/S1 present moderate spondylosis formation.

The osseous and surrounding soft tissue structures of the pelvis are within normal limits. Both coxofemoral joints present smooth osseous margins and congruent joint spaces.

Both stifle joints present smooth margins of the periarticular bones and a mild increased volume of the intracapsular soft tissue shadow, partially effacing the infrapatellar fat pad cranially. The patella of both stifle joints is in situ.

RADIOGRAPHIC DIAGNOSIS

- Mild articular swelling stifle joint bilaterally
- Spondylosis deformans L6/L7 and L7/S1

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Both stifle joints present signs of mild articular swelling, that may present a normal variant for the patient or indicates pathology of the stifle joints – such as pathology of the cruciate ligament/menisci, trauma, arthritis.



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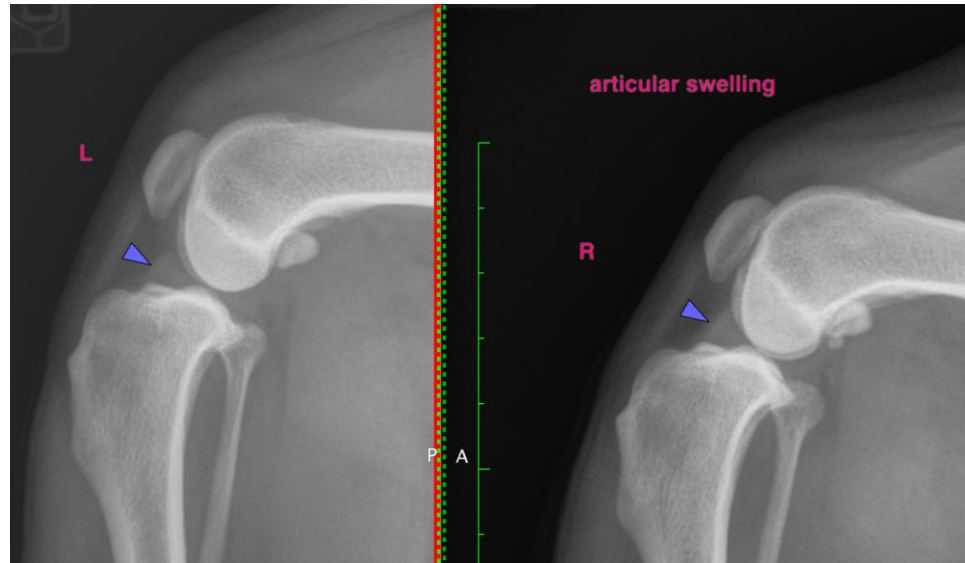
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com