



**PATIENT PRESENTING CLINICAL SIGNS**

**Rusty Lasher** Presented in June for limping on the right front leg and yelping on/off, suspected muscle strain/sprain-started on Meloxicam and Gabapentin with inconsistent improvement per owner and circumducting at recheck appointment. Owner also noted a cough starting in June that progressed until now, gets better with Benadryl per owner

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY OF THE THORAX AND FRONT LIMBS**

A high resolution plain CT study of neck and provided for review.

**BREED**

Mixed

**COMPUTED TOMOGRAPHIC FINDINGS**

The osseous and soft tissue structures of the cervical spine are within normal limits.

**SEX**

Male Neutered

The volume of the right infraspinatus muscle is significantly decreased and a small mineralized body is seen level with the mid third of the scapula within the right infraspinatus muscle. Mild solid but rough periosteal new bone formation is seen in the infraspinatus fossa of the right scapula. The periarticular bones of the right shoulder joint present moderate osteophyte new bone formation and mild exostosis formation is seen within the bicipital groove of the right humerus. The volume of the right brachial musculature is moderately decreased.

**AGE**

10 Years

The periarticular bones of both elbow joints present smooth osseous margins. The medial coronoid process of the elbow joints is well-defined and has a homogeneous density.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

**HOSPITAL NAME**

Catskill Veterinary Services, PLLC

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

**REFERRING VET**

Dr. Daniela Carbone

The lung parenchyma presents the expected architecture and attenuation behavior with randomly distributed interspersed punctuate mineralization and dystelectasis of the caudodorsal dependent aspects of the lung.

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

**INVOICE**

54984

**DATE**

11-3-22

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Advanced muscle atrophy right infraspinatus muscle with focal mild dystrophic mineralization and mild periosteal new bone formation along the right infraspinatus fossa of the right scapula
- Moderate degenerative osteoarthritis right shoulder joint
- Disuse atrophy right brachial musculature
- Dystelectasis caudodorsal aspects of the lung, due to general anesthesia
- Pulmonary osteomas
- Structural normal elbow joints



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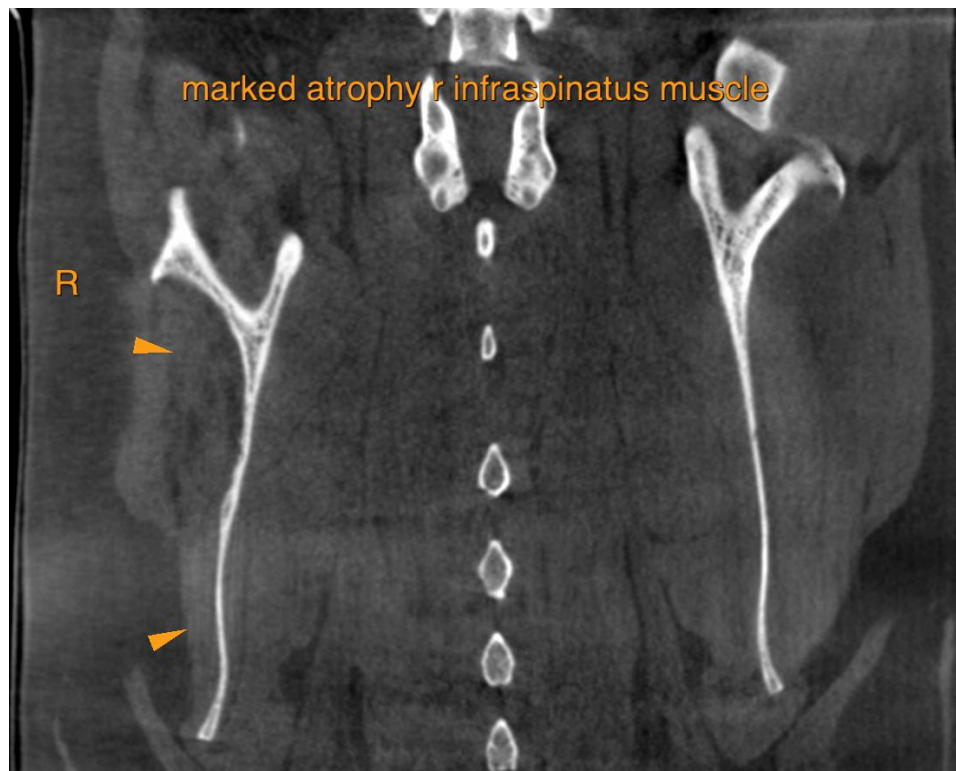
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The advanced atrophy of the right infraspinatus muscle in combination with the described circumducting gait is compatible with contracture of the right infraspinatus muscle – preceding (repetitive) muscle trauma is most common underlying cause. Ultrasound might be used for further evaluation of the muscle architecture and will allow dynamic exam as well. If clinical signs are supporting the diagnosis, surgical management by tenotomy of the tendon of the right infraspinatus muscle tendon is considered as the therapy of choice.

Theoretically neuropathy of the suprascapular nerve is a consideration for the advanced muscle atrophy but accompanying neurogenic muscle atrophy of the right supraspinatus muscle would be expected as well.



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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.

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