

**PATIENT**

Milo Coleman

**PRESENTING CLINICAL SIGNS**

Non weight bearing lameness alternately on both hind limbs.  
Abnormal PE/Chem/CBC/UA Results: Non weight bearing RH. After sedation able to palpate MPLs. R/O Legg Perthes disease since bilateral.

**SPECIES**

Canine

**RADIOGRAPHIC STUDY OF THE STIFLE JOINTS**

Radiographs of the stifle joints in two imaging planes and a ventrodorsal view of the pelvis are provided for review.

**BREED**

Boston Terrier

Stifle joint read requested.

**RADIOGRAPHIC FINDINGS****SEX**

Both stifle joints present smooth margins of the subchondral bone. The patella bilaterally is in situ. The medial fabella is in a relative distal position, bilaterally symmetric finding.

**MN**

The growth plates – including the proximal apo- and epiphysis of the tibia – are age related open. There is no evidence of intracapsular swelling of the stifle joints.

**AGE**

8 Months

**RADIOGRAPHIC DIAGNOSIS**

- Distal position of medial fabella of the stifle joints
- Normal stifle joints with age related open growth plates
- No evidence of Legg-Calve Perthes disease

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS****HOSPITAL NAME**

Pinebrook Animal  
Hospital

The radiographic study of the stifle joints presents without clinically relevant abnormalities. The tibial apo- and epiphysis are age related open. The distal position of the medial fabella is considered as an incidental normal anatomical variant – there is no sign for swelling or osseous remodeling supporting the diagnosis of avulsion of the medial head of the gastrocnemius muscle. Medial patellar luxation was appreciated clinically and can be a source for the described clinical signs.

**REFERRING VET**

Pinebrook Animal  
Hospital

**INVOICE**

48286

**DATE**

11-8-21



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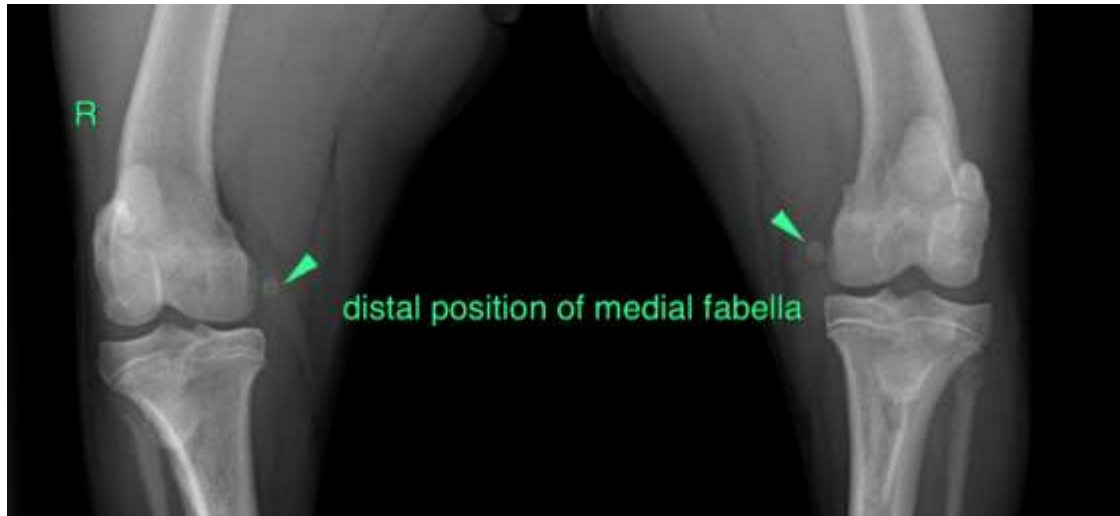
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
sebast.schaub@gmail.com