

**PATIENT**

Cooper Tormey

PRESENTING CLINICAL SIGNS

LEFT front leg - shortened antebrachium, carpal valgus deformity. No crepitation or pain with ROM of carpus or elbow
RIGHT front leg - 2nd digital footpad has a partial P3 and toenail.
RIGHT rear leg - fixed extension, stifle appears to hyperextend +15°, tarsus fixed in extension, unable to manipulate the tarsus or stifle beyond ~5° ROM. Coxofemoral joint appears normal. Not weight bearing due to the overextension of the limb.

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results:

COMPUTED TOMOGRAPHY OF THE LEFT FRONT LIMB AND RIGHT HIND LIMB**BREED**

DSH

A high resolution plain CT study of the front paws joint are provided for review.

SEX

MN

COMPUTED TOMOGRAPHIC FINDINGS

There is marked splaying of the pictured distal segment of the ulna & radius. The carpal joint does not articulate with the radius, nor the ulna and the left carpal joint is in a relative proximal and dorsal position in respect to the radius. Distal to the radius, a small radial carpal bone is seen. The remainder of the carpal bones are small and misshapen. Only three metacarpal bones are present – suspect 3rd to 5th metacarpal bone.

AGE

1

The right carpal joint presents misshapen carpal bones, the intermedioradial carpal bone is noted fused. The first and second carpal bone are absent. Only three metacarpal bones – suspect 3rd to 5th – are appreciated.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDF

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Bilateral complex congenital malformation of the carpal joints/bones with absent carpal bones in the right carpal joint and hypoplasia of the left carpal bones
- Oligodactyly front paws bilaterally
- Suspect congenital left sided carpal luxation – likely secondary to carpal malformation

HOSPITAL NAME

Partridge Animal
Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**REFERRING VET**

Landers David

The findings are consistent with bilaterally complex malformation of the carpal bones with absence of carpal bones and oligodactyly. If the patient presents with clinical signs of pain, the chances of carpal arthrodesis of the left carpal joint ± the right carpal joint can be discussed with orthopedic surgeon.

INVOICE

48773

DATE

12-3-21



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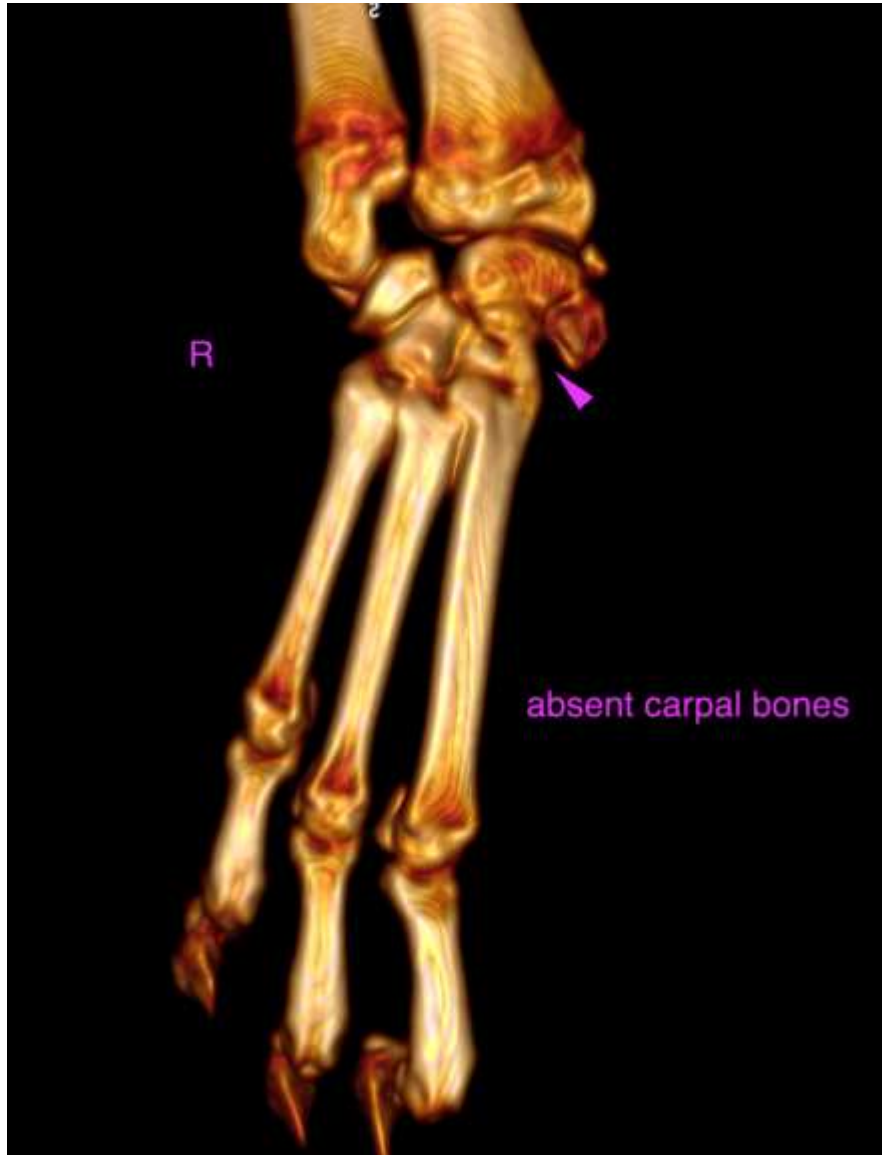
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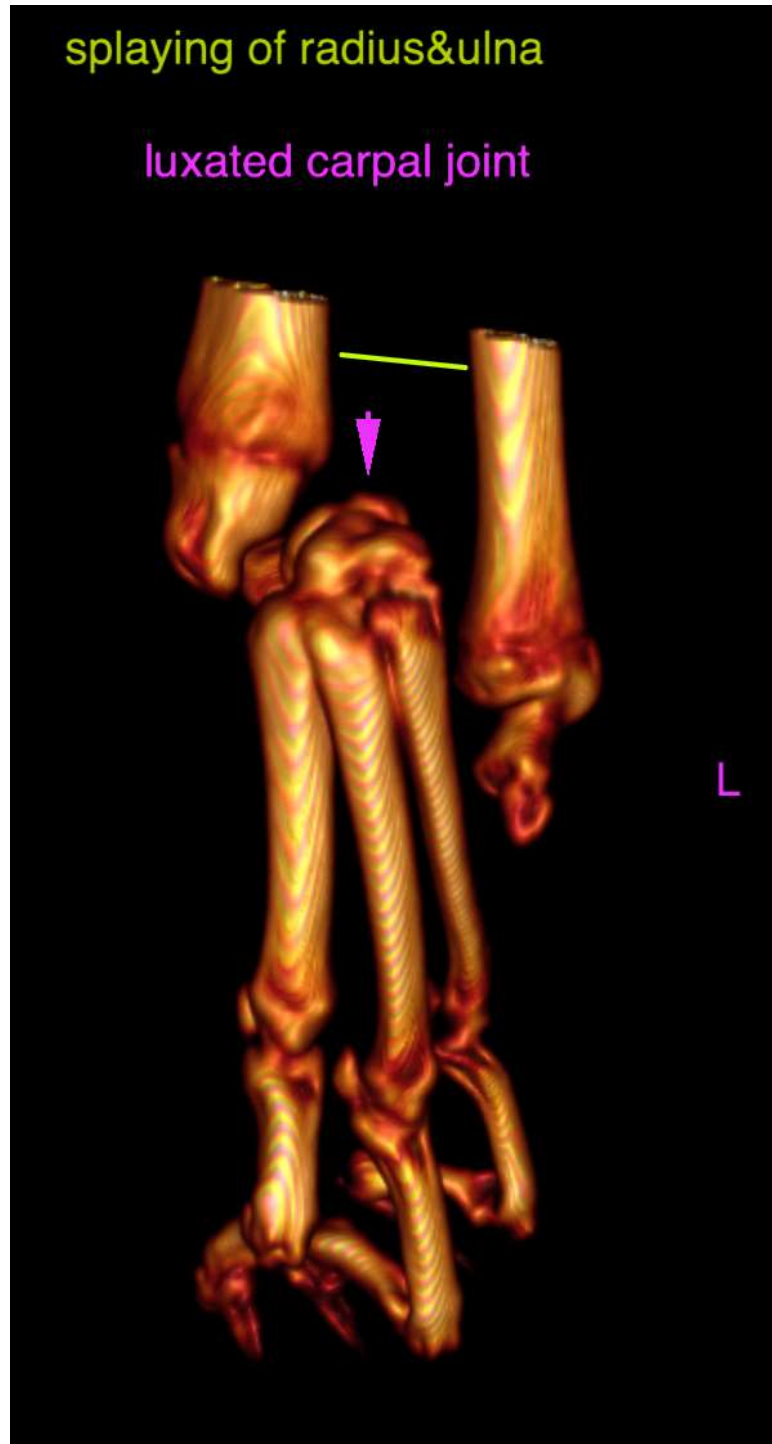
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

BREED

DSH

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