



PATIENT PRESENTING CLINICAL SIGNS

Happy Bang History: lameness for 24 hours on left hind leg. patella luxation grade 3. no clear drawer sign on left stifle joint.

SPECIES RADIOGRAPHIC STUDY OF THE STIFLE JOINT

Canine Radiographs of both stifle joints in two orthogonal imaging planes are provided for review. Images are provided in JPEG file format.

BREED RADIOGRAPHIC FINDINGS

Yorkie The periarticular bones of the left stifle joint present very mild osteophyte new bone formation. In the mediolateral projection, the patella is superimposed on the femoral condyles. The left stifle joint presents with a mild intracapsular soft tissue swelling.

SEX

Spayed Female The right stifle joint presents smooth osseous margins, there is no evidence of intracapsular swelling. In the craniocaudal projection, the patella is superimposed on the medial femoral condyle.

AGE

- 11 Years
- Medial patellar luxation left stifle joint
 - Mild articular swelling left stifle joint
 - Very mild degenerative osteoarthritis stifle joint bilaterally
 - Possible medial patellar luxation right stifle joint

INTERPRETED BY

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The mild joint effusion of the left stifle joint and the very mild degenerative changes of the left stifle joint can be a sequela to chronic medial patellar luxation – the clinical relevance of the medial patellar luxation is unclear, due to the age of the patient. Rule out acute insult and pathology of the cranial cruciate ligament ± meniscal disease. A clinical trial with rest and NSAID might be tried in first instance and reevaluating the patient in 2 weeks.

HOSPITAL NAME

Tenaflly VC

REFERRING VET

Dr. Kyoung Han

INVOICE

18978

DATE

12/3/22



PATIENT

Happy Bang

SPECIES

Canine

BREED

Yorkie

SEX

Spayed Female

AGE

11 Years

INTERPRETED BY

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

HOSPITAL NAME

Tenaflly VC

REFERRING VET

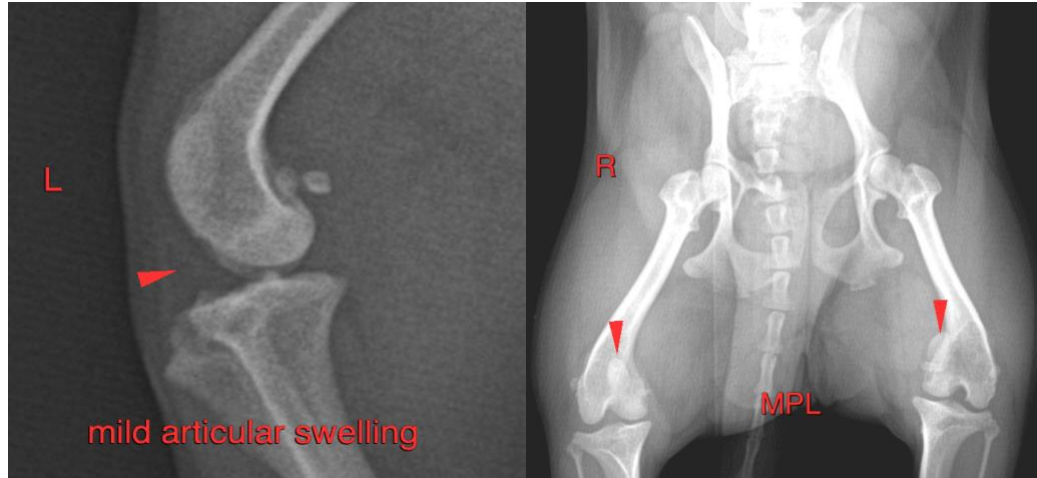
Dr. Kyoung Han

INVOICE

18978

DATE

12/3/22



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
sebast.schaub@gmail.com