



PATIENT

Sallie Schmehr

SPECIES

Canine

BREED

American Staffordshire
Terrier

SEX

FS

AGE

8Y, 1M, 29D

WEIGHT

35kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

AMC

HOSPITAL NAME

Green Dog Dental and
Wellness

REFERRING VET

Dr Scott

INVOICE

73715

DATE

2-11-26

PRESENTING CLINICAL SIGNS

History of left CCLR repair 5+ years ago. 3 day history of increased right hind lameness, decreased activity and difficulty sitting. Negative cranial drawer and tibial thrust. Soft tissue swelling of right stifle apparent on physical exam.

RADIOGRAPHIC STUDY OF THE STIFLE JOINTS

Radiographs of the stifle joints in two orthogonal image planes are provided for review.

RADIOGRAPHIC FINDINGS

The periarticular bones of both stifle joints present advanced osteophyte new bone formation. The tibial plateau bilaterally is elongated caudally. Both stifle joints present a moderate intracapsular soft tissue swelling, effacing the infrapatellar fat pad cranially and distorting the fascial plane caudally, R>L. Small mineral opaque bodies are superimposed on the cranial compartment of both stifle joints

At the caudal aspect of the left tibial tuberosity, a TTA implant is seen and unremarkable in place; the osteotomy is filled with cancellous bone.

RADIOGRAPHIC DIAGNOSIS

- History of surgical management of pathology of the cranial cruciate ligament of the left stifle joint via TTA – the osteotomy is in the remodeling phase
- Advanced osteoarthritis stifle joints bilaterally
- Caudal osseous elongation of the tibial plateau bilaterally
- Articular swelling stifle joint bilaterally
- Small metaplasia joint capsule both stifle joints

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The degenerative joint disease of both stifle joints and caudal elongation of the tibial plateau is indicative for chronic instability due to rupture of the cranial cruciate ligament ± meniscal pathology. The findings are supported by the described clinical findings.



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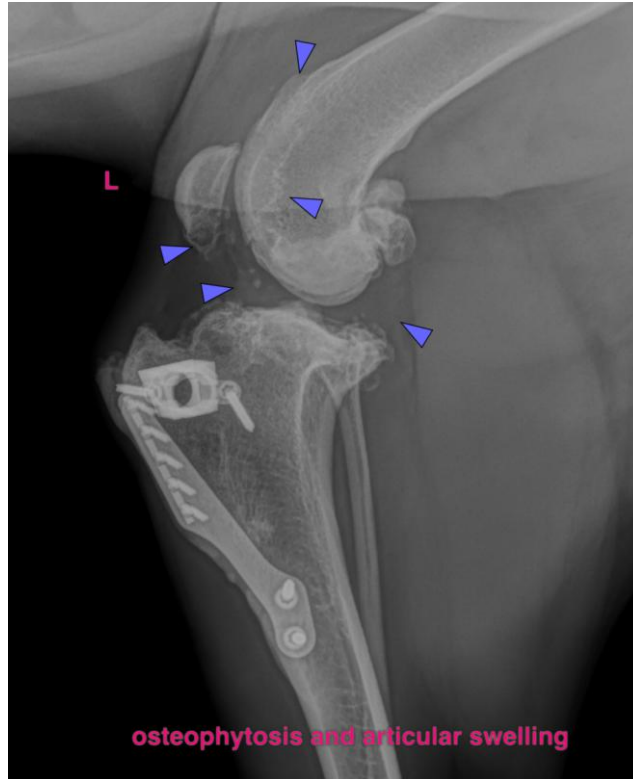
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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