



PATIENT

Wilson Bashara

SPECIES

Canine

BREED

Maltese Mix

SEX

NM

AGE

10

WEIGHT

12lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Peter Bashara

HOSPITAL NAME

Gentle Doctor Animal
Hospital

REFERRING VET

Peter Bashara

INVOICE

73554

DATE

2-2-26

PRESENTING CLINICAL SIGNS

History:

- Left TPLO completed 10/2025
- Acute injury to Right 48 hours prior
- Imaging today prior to surgical consult
- Suspect complete ACL rupture right side

Abnormal PE/Chem/CBC/UA Results: Labs pending

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 the left stifle joint present mild osteophyte new bone formation. Along the soft tissue shadow of the patellar ligament of the left stifle joint, a mild diffuse soft tissue swelling is appreciated. At the medioproximal aspect of the left stifle joint a TPLO implant is seen and presents without abnormalities.

The periarticular bones of the right stifle joint present smooth osseous margins. The right stifle joint presents a moderate intracapsular soft tissue swelling, effacing the infrapatellar fat pad cranially and distorting the fascial plane caudally. Moderate cranial subluxation of the right tibia is seen.

Multiple mineral opaque calculi are superimposed on the urinary bladder.

RADIOGRAPHIC DIAGNOSIS

- Failure right cranial cruciate ligament
- Articular soft tissue swelling right stifle joint
- History of surgical management of pathology of the left cranial cruciate ligament via TPLO – the osteotomy is in the remodeling phase
- Mild osteoarthritis left stifle joint
- Possible desmopathy left patellar ligament versus surrounding soft tissue swelling
- Cystolithiasis without mechanical obstruction

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are consistent with right sided rupture of the cranial cruciate ligament. A positive drawer sign or tibial compression test under general anesthesia will support the diagnosis – partial rupture of the cranial cruciate ligament and potential thickening of the synovial capsule can result in only mild instability.

The mineral opaque calculi represent cystolithiasis and complete urinalysis is beneficial. Due to the small size of the urinary calculi, they are prone to be displaced into the urethra and cause mechanical urethral obstruction.



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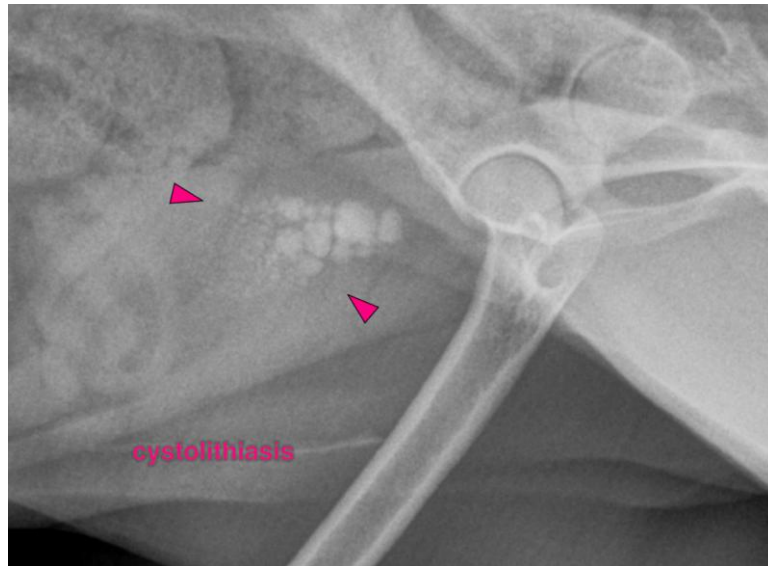
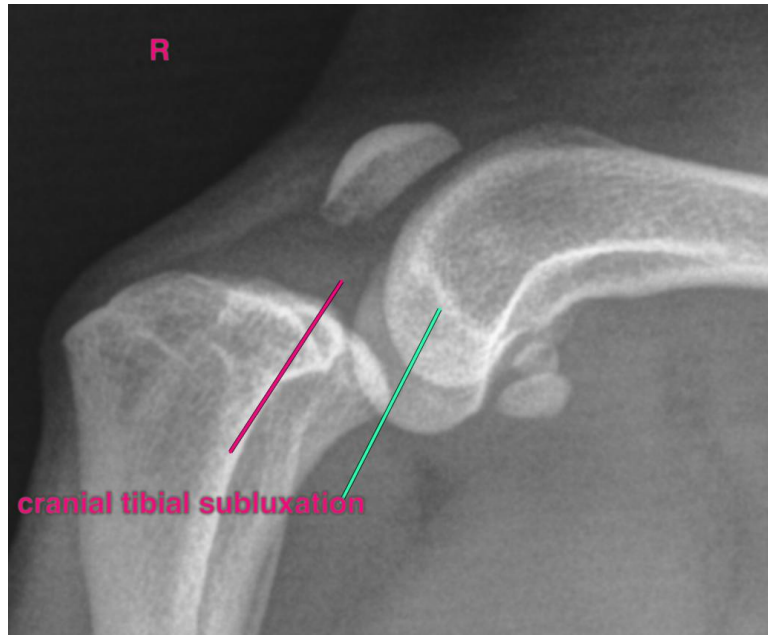
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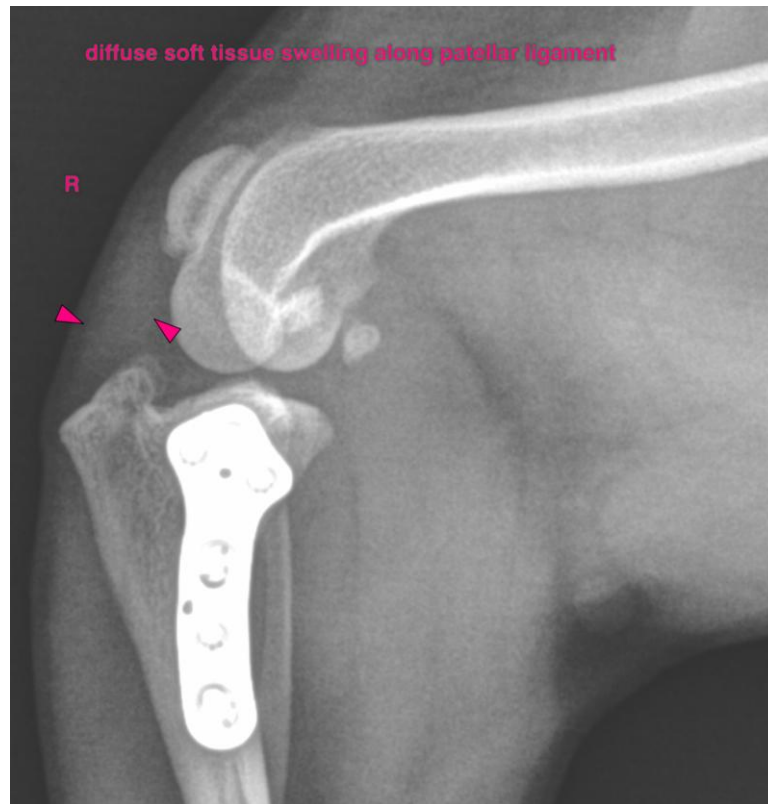
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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