

**PATIENT**

Jimmy Townsend

PRESENTING CLINICAL SIGNS

Lameness off and on right rear.

SPECIES

K9

RADIOGRAPHIC STUDY OF THE RIGHT TARSAL JOINT

Radiographs of the right tarsal joint in two orthogonal imaging planes are provided for review.

BREED

GSHP

RADIOGRAPHIC FINDINGS

The right talocrural joint presents a moderate to intracapsular soft tissue swelling. An isolated, triangular shaped mineralized body is superimposed on the caudoproximal outpouching of the joint capsule of the right talocrural joint, measuring approximately 5.7 x 5.7 mm in size. Three smaller mineralized bodies are superimposed on the cranial aspect of the outpouching of the joint capsule of the right talocrural joint measuring up to 1.7 mm in size. In the dorsoplantar view, there appears to be a defect in the medial aspect of the lateral trochlear ridge of the talus, measuring approximately 5 x 2 mm in size.

SEX

M

The left talocrural joint presents without evidence of articular swelling and smooth osseous margins.

AGE

6

RADIOGRAPHIC DIAGNOSIS

- Suspect osteochondrosis dissecans (OCD) lesion lateral trochlear ridge of the right talus
- Moderate articular swelling right talocrural joint

INTERPRETED BYSebastian Schaub, DVM
Dr. med. vet. DipECVDI**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The radiographic study is most consistent with OCD lesion of the right talocrural joint with a defect at the medial aspect of the lateral trochlear ridge of the talus. The mineralized bodies can present dislodged fragments of cartilage, attached to the synovial lining which became mineralized and increased in size. A CT study of the tarsal joint can be used to confirm the findings.

HOSPITAL NAMEBayshore Veterinary
Hospital**REFERRING VET**

Tim Hunt

INVOICE

50191

DATE

2-8-22



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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.

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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

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