



**PATIENT PRESENTING CLINICAL SIGNS**

**Molly Larocque** History: Molly is 5 months old, with no known trauma. She has an approximately 1.5 month history of on/off limping on the RF. Molly is hard to assess in the clinic, but owner describes normal play, then limping afterwards. The mix of breeds in her background include a Basset and a Bulldog.

**SPECIES** Concern/presumed FCP on the R elbow, possibly abnormal L as well? Shoulders WNL?  
Abnormal PE/Chem/CBC/UA Results:

Canine

**RADIOGRAPHIC STUDY OF THE ELBOW JOINTS**

**BREED** Radiographs of the left elbow joint in two imaging planes and craniocaudal projections of the right elbow joint are provided for review.

Basset  
Hound/Bulldog cross

**RADIOGRAPHIC FINDINGS**

**SEX**

A breed specific chondrodystrophic conformation of the osseous structures is present.

Spayed Female

The periarticular bones of the left elbow joint present smooth osseous margins, unremarkable.

**AGE**

The periarticular bones of the right elbow joint present moderate osteophyte new bone formation. A moderate radio-ulnar step formation of approximately 5 mm is seen with a relative shortening of the ulna.

6 Months

**RADIOGRAPHIC DIAGNOSIS**

**INTERPRETED BY**

- Suspect short ulna syndrome with subsequent incongruity of the elbow joint
- Mild to moderate degenerative osteoarthritis right elbow joint
- Normal left elbow joint

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**HOSPITAL NAME**

The findings highly suggestive for right sided short ulna syndrome and subsequent incongruity of the right elbow joint. Unfortunately, only a craniocaudal view of the elbow joints is provided, recommend complementing the radiographic study by a mediolateral view of the right elbow joint. A CT study of the elbow joints might be beneficial as well for evaluation of the suspected radio-ulnar step formation and ruling in/out accompanying pathology of the medial coronoid process. If the presumptive diagnosis of short-ulna syndrome can be confirmed, the chances of distal ulna ostectomy or dynamic double oblique proximal ulna-osteotomy should be discussed with orthopedic surgeon.

Lacombe VC

**REFERRING VET**

Dr. Laurel Arvidson

**INVOICE**

14474

**DATE**

3/24/22



**PATIENT**

Molly Larocque

**SPECIES**

Canine

**BREED**

Basset  
Hound/Bulldog cross

**SEX**

Spayed Female

**AGE**

6 Months



**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.

**INTERPRETED BY**

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