

**PATIENT**

Romeo Guay

**SPECIES**

Canine

**BREED**

Sheperd Mix

**SEX**

Neutered Male

**AGE**

6 Years

**WEIGHT**

62.3 kg

**INTERPRETED BY**

Sebastian Schaub,  
DVM, Dr. med. vet.  
DipECVDI

**IMAGING PERFORMED BY**

Mobile Pet Imaging

**HOSPITAL NAME**

Dr. Armstrong

**REFERRING VET**

Mobile Pet Imaging

**INVOICE**

36454

**DATE**

3/31/26

**PRESENTING CLINICAL SIGNS**

Romeo is a 6-year-old male neutered Rottweiler mix presenting for right forelimb lameness that began acutely in October 2025 while the patient was outdoors. No known precipitating trauma was identified. Prior to onset, the patient was reportedly completely normal. Lameness has remained approximately the same severity since onset, with intermittent episodes of complete non-weight-bearing on the right forelimb, particularly when jumping.

**COMPUTED TOMOGRAPHIC STUDY OF THE ELBOW JOINTS AND CARPI**

A high resolution pre- and post-contrast CT study of the elbow joints and a post-contrast CT study of the carpi is provided for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

The volume of the musculature of the right front limb is moderately decreased. The osseous structures of the right front limb present a generalized decreased thickness of the cortices.

Both elbow joints present very mild osteophyte formation along the medial aspect of the humeral condyle. The medial coronoid process of both elbow joints is mildly heterogeneous. At the caudomedial aspect of the left medial humeral epicondyle, an isolated, well-defined, ovoidal shaped mineral attenuating body is seen, measuring 4 x 3 x 5 mm.

The cranial cortex of the mid diaphysis of the right ulna – level with the insertion of the interosseous ligament – presents a well-defined irregular shaped geographic osteolytic defect.

The osseous and surrounding soft tissue structures of the carpal joints are unremarkable.

The axial sesamoid bone of the metacarpophalangeal joint of the 2<sup>nd</sup> and 5<sup>th</sup> digit bilaterally are multipartite; the periarticular bones of the respective metacarpophalangeal joints present mild osteophyte new bone formation.

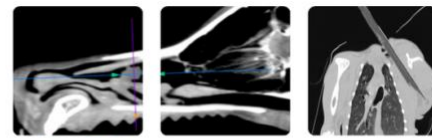
At the proximal aspect of the metacarpal pad of the right front paw, a soft tissue swelling with a roundish zone of granular mineral attenuation is appreciated.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Soft tissue swelling and dystrophic mineralization proximal segment metacarpal pad right front paw
- Mild osteoarthritis elbow joints
- Equivocal coronoid disease elbow joint bilaterally
- Medial ossified body left elbow joint
- Multipartite axial sesamoid bone metacarpophalangeal joint 2<sup>nd</sup> and 5<sup>th</sup> digit bilaterally
- Radio-ulnar ischemic necrosis (RUIN) lesion right ulna
- Disuse atrophy musculature right front limb and osteopenia

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The changes of the right metacarpal pad can present chronic soft tissue inflammation with dystrophic mineralization or neoplastic transformation of the pad – FNA sampling/biopsy can be used for specification. No foreign material is appreciated but can be missed in post contrast series or in case of isoattenuating material.



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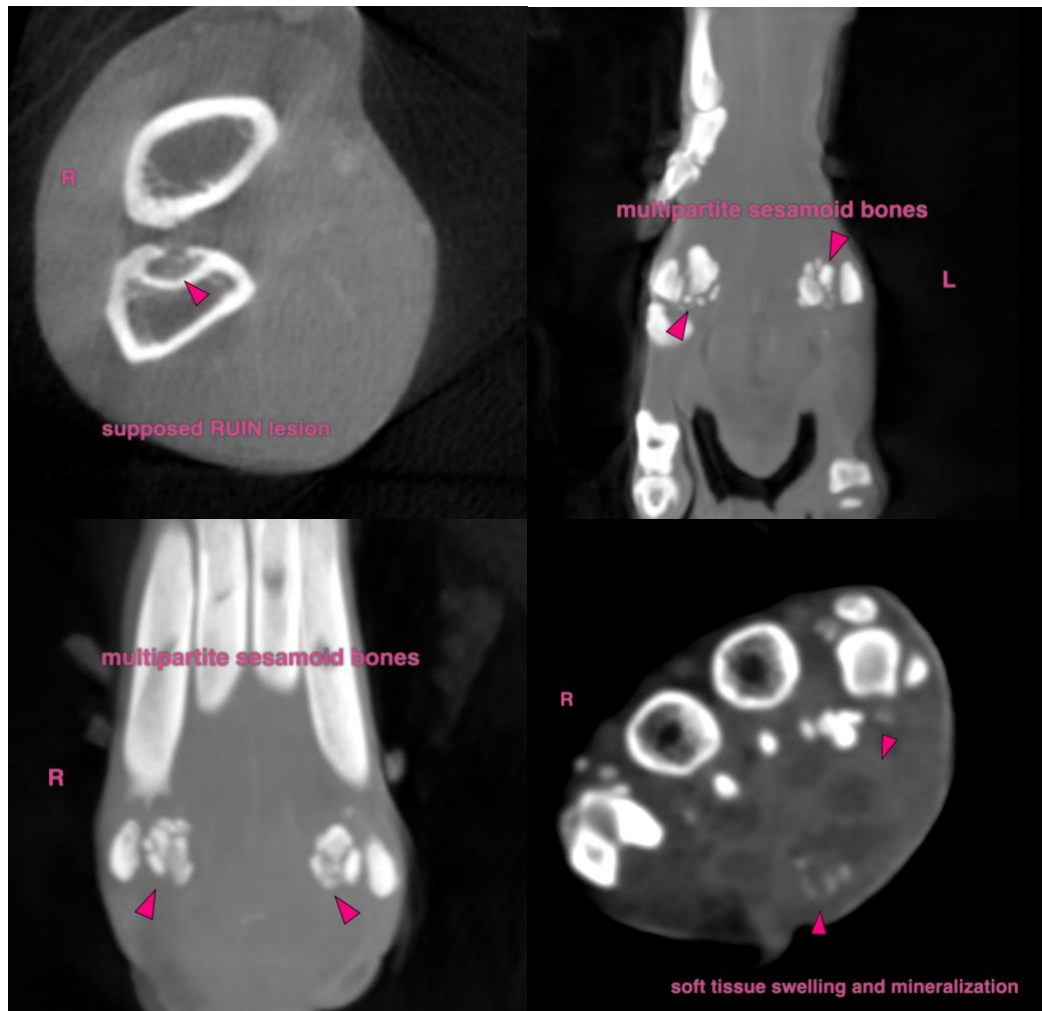
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The CT study reveals no additional abnormalities that do explain the significant right front limb – in some case the multipartite sesamoid bone can be a source for lameness. The appreciated RUIN lesion is likely incidental. Rule out pathology of the cervical spine, brachial plexus or shoulder joint as well.



**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**, DVM, Dr. med. vet. DipECVDI  
[info@sonopath.com](mailto:info@sonopath.com)