

**PATIENT**

Skye Schulzer

**SPECIES**

Canine

**BREED**

Dachshund

**SEX**

Female

**AGE**

1

**INTERPRETED BY**Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI**HOSPITAL NAME**Colyton Veterinary  
Hospital**REFERRING VET**

Chris Papantonio

**INVOICE**

51480

**DATE**

4-12-22

**PRESENTING CLINICAL SIGNS**

Presented for lameness in LFL in February and March and treated conservatively with NSAIDs and a pentosan course. At the time pain was isolated to the left elbow. The right elbow at the time appeared to be normal. No obvious pain isolated to any other joint. Ongoing lameness to LFL so CT scan performed. Concerned about elbow dysplasia  
Abnormal PE/Chem/CBC/UA Results:

**COMPUTED TOMOGRAPHY OF THE FRONT LIMBS**

A plain CT study of the front limbs in a bone and soft tissue reconstruction is provided for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

The skeletal structures present a breed specific chondrodystrophic conformation.

Both shoulder joints present smooth osseous margins, unremarkable.

The left elbow joint presents a mild to moderate radio-ulnar step formation, measuring approximately 2.1 mm.

The right elbow joint presents a congruent joint space.

The osseous and soft tissue structures of the distal aspects of both front limbs are within normal limits.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Incongruity left elbow joint with mild to moderate radio-ulnar step formation
- Normal shoulder joints
- Normal carpal joints and front paws

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The incongruity of the left elbow joint can be a source for pain and subsequent lameness, no overt abnormalities of the medial coronoid process are appreciated. Arthroscopy – if applicable in this small breed dog – can be used to confirm incongruity of the left elbow joint and rule out accompanying pathology of the medial coronoid process entirely. If congruity is confirmed, the chances of bi-oblique dynamic proximal ulnar osteotomy might be discussed with orthopedic surgeon.



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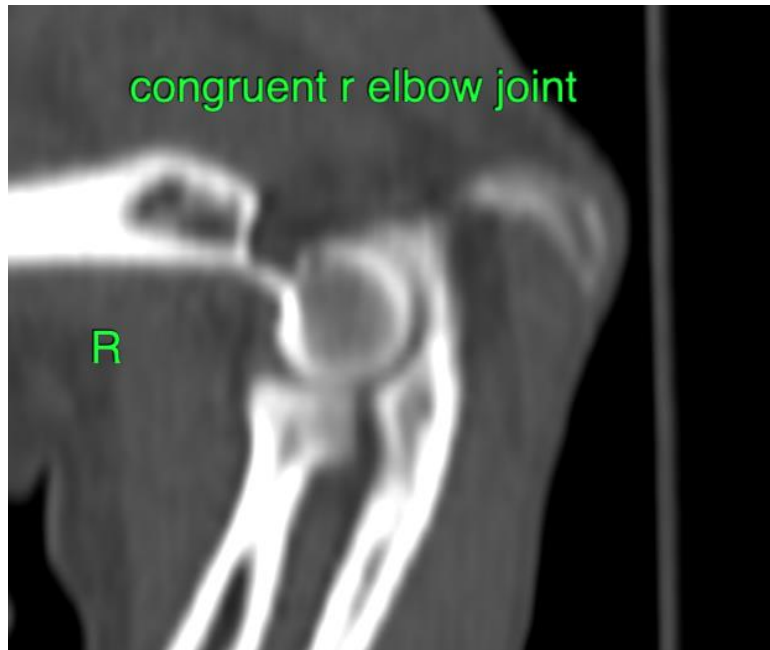
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
sebast.schaub@gmail.com