



PATIENT PRESENTING CLINICAL SIGNS

Bella Figueroa Reason for Visit: CHECK LH LEG/LIMPING History: 4 m/o F bulldog mix presented for check LH leg. Lastnight O heard a yelp then noticed P limping from LH leg, O assumes it's from playing with housemate. This morning O noticed P dragging LH leg, however P is weight-bearing in the room.

SPECIES Otherwise, doing well.

Canine Abnormal PE/Chem/CBC/UA Results: Hydration: N Mentation: N EENT: N Oral Cavity: N Lymph Nodes: N Skin: N CV/Respiratory: N Abd/GI: N Uro/Perineum: N Musculoskeletal: Weightbearing lame left rear. Painful on ext of left stifle. Mild patellar laxity but unable to luxate. No drawer. No obvious long bone pain, no palpable fractures. No pain on deep palpation of MT's/toes. Neurological: N

BREED RADIOGRAPHIC STUDY OF THE STIFLE JOINTS

Bulldog Mix Radiographs of the stifle joints in two orthogonal imaging planes are provided for review.

RADIOGRAPHIC FINDINGS

SEX The growth plates are age related open.

Female Both stifle joints presents smooth osseous margins and there is no evidence of intracapsular soft tissue swelling. The patella of the stifle joints is superimposed on the medial femoral condyle in the craniocaudal projection.

AGE RADIOGRAPHIC DIAGNOSIS

4 Months

- Medial patellar luxation bilaterally

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The main finding is the bilateral medial patellar luxation, the clinical relevance for the acute presenting clinical signs is questionable. There is no evidence of fracture or growth plate avulsion.

HOSPITAL NAME

DPC Veterinary
Hospital

The distal physis of the left tibia is mildly widened in the caudal segment – can be due to projection, however, rule out pain originating from the distal tibia.

REFERRING VET

Dr. Feldt

INVOICE

57853

DATE

4-18-23



PATIENT

Bella Figueroa

SPECIES

Canine

BREED

Bulldog Mix

SEX

Female

AGE

4 Months

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HOSPITAL NAME

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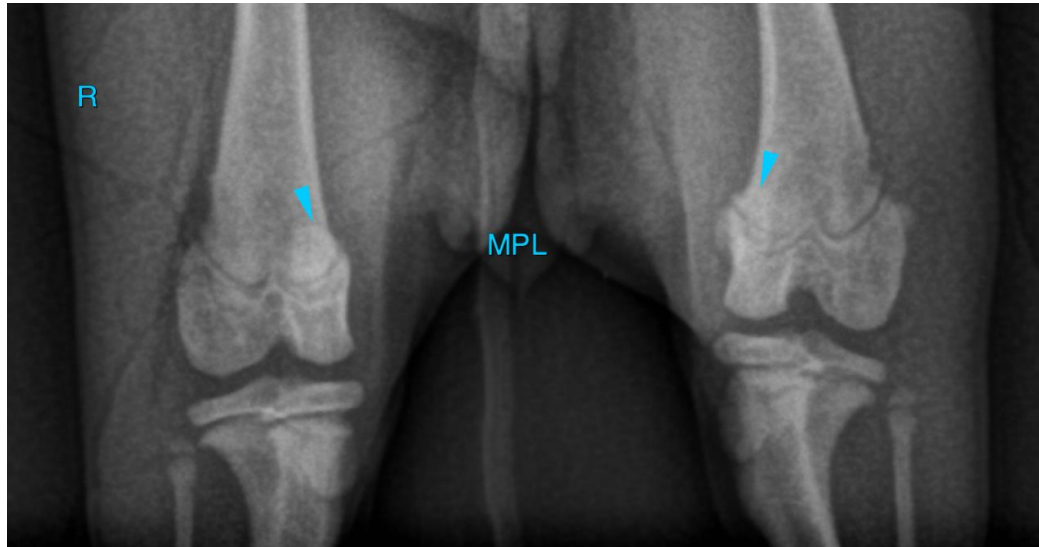
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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