



PATIENT

Lusa Verbeck

PRESENTING CLINICAL SIGNS

48 hour history of NWB lameness of her LPL. Patient has indoor and outdoor access, owner did not observe a trauma event. Previous history of R TTA in May 2018.

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE PELVIS&STIFLE JOINTS

A complete radiographic study of the pelvis and the stifle joints is provided for review.

BREED

Labrador Retriever X

RADIOGRAPHIC FINDINGS

The osseous and surrounding soft tissue structures of the pelvis are within normal limits. Both coxofemoral joints present smooth osseous margins and congruent joint spaces.

SEX

FS

The periarticular bones of the right stifle joint present advanced osteophyte new bone formation and a mild to moderate intracapsular soft tissue swelling is noted. A TTA cage and plate are present in the right tibia, the osteotomy is filled with trabecular bone.

The left stifle joint presents a moderate intracapsular soft tissue swelling. Mild cranial subluxation of the left tibia is appreciated.

AGE

9.5 Years

RADIOGRAPHIC DIAGNOSIS

- Left sided cranial tibial subluxation
- Moderate articular swelling left stifle joint
- History of surgical management of cranial cruciate ligament rupture of the right stifle joint by TTA – the osteotomy is in the remodeling phase
- Advanced degenerative osteoarthritis right stifle joint and mild to moderate articular swelling

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic changes indicate failure of the cranial cruciate ligament of the left stifle joint ± meniscal pathology. A positive drawer sign or tibial compression test under general anesthesia can be used to confirm the diagnosis.

HOSPITAL NAME

Tahoe Intergrative
Veterinary Care

REFERRING VET

Dr. Amanda Stuart

INVOICE

51691

DATE

4-21-22



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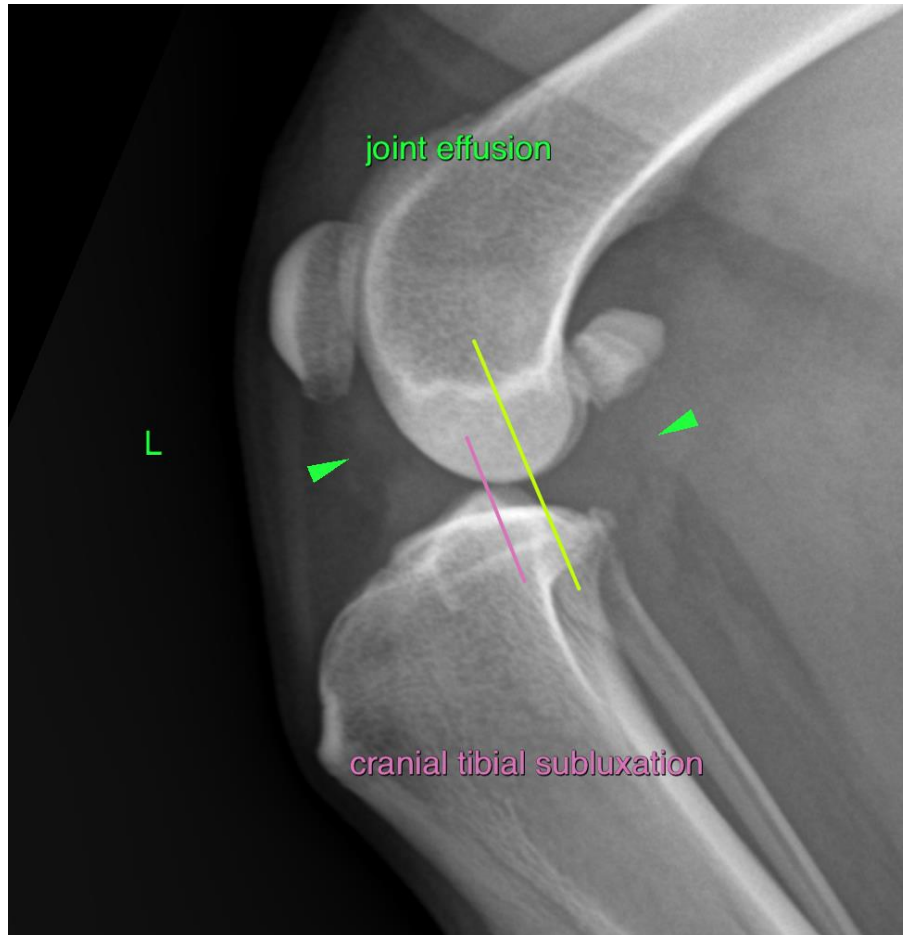
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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