

**PATIENT PRESENTING CLINICAL SIGNS**

Mia-Meow Stevens Recheck hip xrays. O sat on pt in end of Dec. Put pt on buprenorphine. O reports pt doing well. Sent original xrays in Jan for comparison.

**SPECIES RADIOGRAPHIC STUDY OF THE PELVIS**

Feline Radiographs of the pelvis in two orthogonal imaging planes are provided for review.

**RADIOGRAPHIC FINDINGS****BREED**

DSH

An oblique fracture line with smooth rounded margins is running in a proximal to distal direction through the left femoral neck. Advanced atrophy of the left femoral neck is seen. The left acetabular groove is shallow, and the center of the left femoral neck is lateral to the lateral acetabular rim. The soft tissue shadow of the left thigh musculature is moderately decreased in comparison to the right hind limb. Multiple small gas opacities are superimposed on the lateral aspect of the left thigh musculature - consistent with preceding intramuscular injection.

**SEX**

Spayed Female

**RADIOGRAPHIC DIAGNOSIS**

- Chronic fracture left femoral neck with secondary oligotrophic non-union
- Shallow left acetabular groove
- Secondary disuse atrophy left thigh musculature

**AGE**

8 Months

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS****INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The radiographic changes are consistent with chronic fracture of the left femoral neck. The shallow left acetabular groove is a sequela to the lack of formative stress on the acetabulum due to disuse. Consider left sided femoral head ostectomy as surgical treatment option.

**HOSPITAL NAME**

The Pet Hospital of  
Stratford

**REFERRING VET**

Dr. Robert Bashkin

**INVOICE**

57638

**DATE**

4-5-23



**PATIENT**

Mia-Meow Stevens

**SPECIES**

Feline

**BREED**

DSH

**SEX**

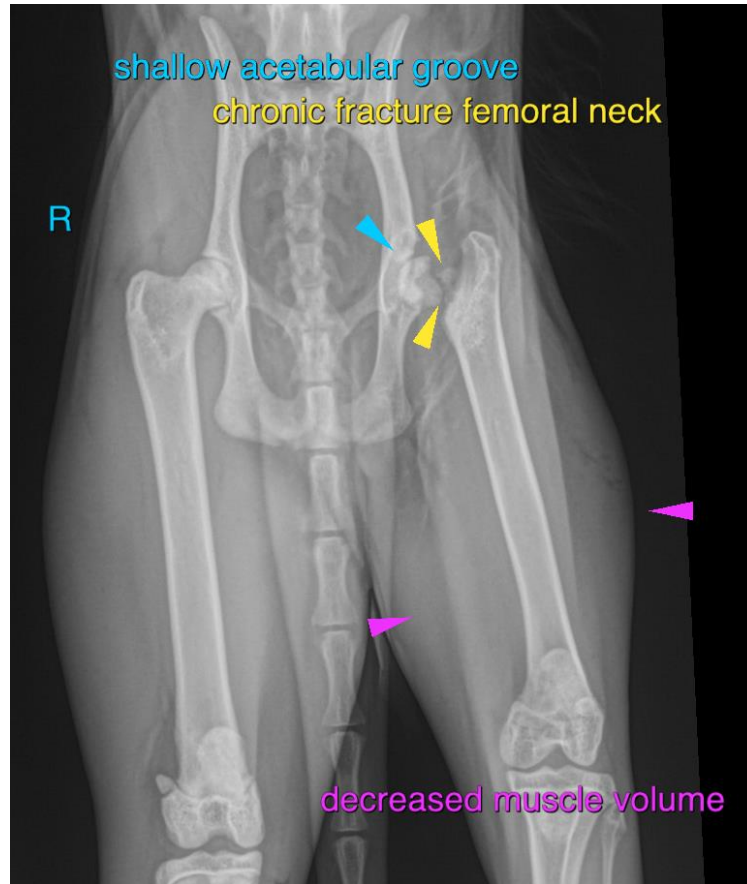
Spayed Female

**AGE**

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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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