



**PATIENT**

Hunter Ackley

**PRESENTING CLINICAL SIGNS**

Lameness LF leg; mild response to Carprofen 100mg- BID; HWT4DX- Neg x4

**SPECIES**

Canine

**RADIOGRAPHIC STUDY OF THE LEFT SHOULDER JOINT AND BOTH ELBOW JOINTS**

Radiographs of the left shoulder and elbow joint in two imaging planes and a craniocaudal view of the right elbow joint are provided for review.

**BREED**

Labrador Retriever

**RADIOGRAPHIC FINDINGS**

The caudal margins of the shoulder joint present mild pointed edges. A small mineral ovoid shaped body is superimposed on the cranioproximal aspect of the major tubercle of the left humerus, measuring 2.2 mm in size.

**SEX**

Neutered Male

Both elbow joints present smooth osseous margins. The contour of the medial coronoid process of the left elbow joint is well-defined and presents sharp margins, unremarkable. The joint space of both elbow joints is congruent.

**AGE**

5 Years

**RADIOGRAPHIC DIAGNOSIS**

- Very mild degenerative osteoarthritis left shoulder joint
- Calcifying tendinopathy tendon left supraspinatus muscle
- Normal elbow joints bilaterally, no signs for elbow dysplasia

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The left elbow joint presents evidence of very mild degenerative joint disease, but no underlying cause can be specified. If there is clinical evidence that the lameness is originating from the left shoulder joint, recommend complementing workup by an ultrasound examination of the shoulder joint to rule in/out pathology of the bicipital tendon or rotator cuff injury.

**HOSPITAL NAME**

Byram Animal  
Hospital

The mineralization of the supraspinatus tendon is commonly an incidental finding and not associated with clinical signs.

**REFERRING VET**

Dr. Carlos Abdul-  
Chani

**INVOICE**

51845

**DATE**

5-2-22



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**SEX**

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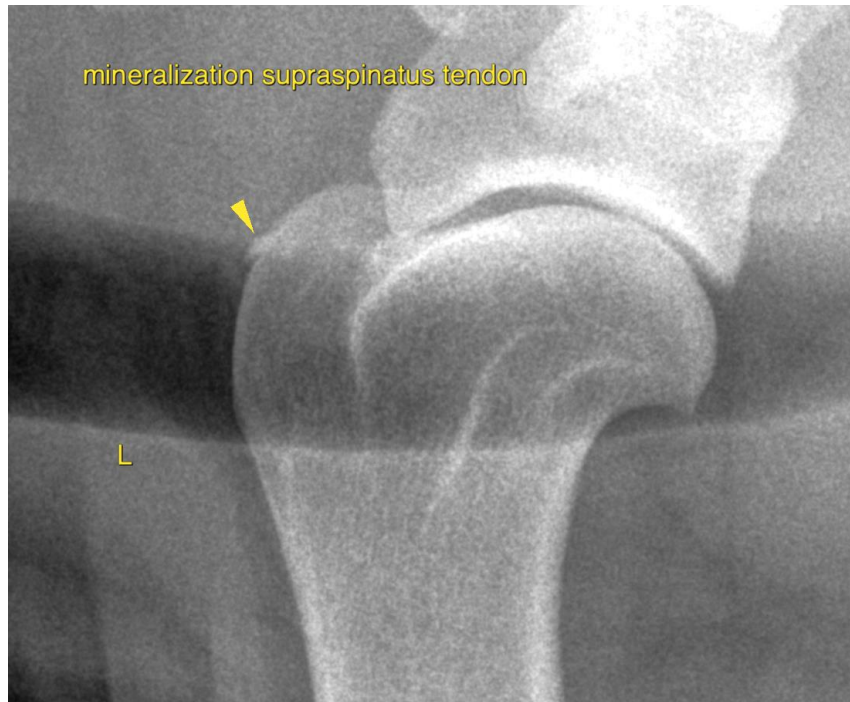
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
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