



PATIENT PRESENTING CLINICAL SIGNS

Peachie Marcus Past 1.5 yrs, inability to jump on hind surfaces, seems sore on left hind leg hip/groin area. Sometimes will see NWB on left hind limb. Currently on 30mg Gabapentin but no real results.
Abnormal PE/Chem/CBC/UA Results: CBC/Chemistry- NSF. Discomfort/pain on deep inguinal palp of left hind leg. Symmetrical muscle mass, normal ROM.

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE LEFT STIFLE JOINT

Radiographs of the left stifle joint in a two orthogonal imaging planes are provided for review.

BREED

Domestic Long Hair

RADIOGRAPHIC FINDINGS

The periarticular bones of the left stifle joint present smooth osseous margins and there is no evidence of an intracapsular soft tissue swelling. The medial aspect of the left thigh musculature presents multiple hypodense streaks – possible preceding intramuscular injection.

SEX

Female Spayed

The osseous and surrounding soft tissue structures of the right stifle joint present no abnormalities in the craniocaudal projection.

RADIOGRAPHIC DIAGNOSIS

- Normal left stifle joint

AGE

4 Years, 10 Months

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The osseous structures of the left hind limb present without abnormalities explaining the chronic clinical signs. There appear to be some gas opacities within the medial aspect of the left thigh musculature that can be a sequela to preceding intramuscular injection or odd projection of fat containing fascial planes. A differential would be emphysema either due to a wound (no respective history) or abscess/empyema formation – chronicity of clinical signs makes the latter differential unlikely here .

HOSPITAL NAME

POCONO PEAK
VETERINARY
CENTER

REFERRING VET

Dr. Christine Coyle

INVOICE

58850

DATE

6-14-23



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Peachie Marcus

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Domestic Long Hair

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Female Spayed

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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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