



**PATIENT**

Sophie Caulfield

**PRESENTING CLINICAL SIGNS**

Presenting Complaint: Sophie presented with RFL lameness, shoulder pain. When did you first notice the problem? August 2021 Has Sophie had any previous history of this? Had shoulder stabilization surgery with Dr. Davies March 2021. Did well until August when she started intermittent limping again Does the patient have any underlying conditions?? None reported Has Sophie had any diagnostics or procedures Rads at rdvm How has Sophie's appetite been? Good When did Sophie last eat? - Have you noticed any vomiting, diarrhea, urinary concerns, coughing, or any other abnormal signs? None reported If so, when did you first notice these? - Are you currently giving Sophie any medications or supplements? Adequan injections monthly, 75mg Carprofen and 300mg Gabapentin PRN. Owners report Sophie is no longer able to go for walks, she usually is three legged lame. The last few months she has significantly declined. She is doing water therapy. She was also seen for chiropractics and it was her R shoulder that was painful. Owners are not able to do any PROM with her as she is too painful. Owner states rdvm noted one of the screws in her shoulder looks like it is coming loose and owner was wondering if maybe hardware needs to be removed.

**SPECIES**

Canine

**BREED**

Standard Poodle

**SEX**

FS

**COMPUTED TOMOGRAPHY OF THE FRONT LIMBS CERVICAL SPINE SPINE**

A high resolution pre- and post-contrast CT study of the cervical/cranial thoracic spine including parts of the front limbs are provided for review.

**AGE**

11 Years, 5 Months

**COMPUTED TOMOGRAPHIC FINDINGS**

The osseous and soft tissue structures of the cervical spine are within normal limits.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

The vertebral endplates T7/T8 present mild spondylosis formation.

The brachial plexus bilaterally is within normal limits.

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Two surgical screws are appreciated in the medial aspect of the collum of the right scapula and one surgical screw is seen in the proximal segment of the right proximal humerus; multiple streak artefacts are emanating from the surgical implants. The periarticular bones of the right shoulder joint present mild to moderate osteophyte new bone formation and moderate exostosis formation is seen in the bicipital groove of the right humerus.. Post contrast administration, significant thickening of the joint capsule of the right shoulder joint is appreciated.

The right axillary lymph nodes are prominent.

**REFERRING VET**

Dr. Fugazzi

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- History of surgical stabilization of medial instability of the right shoulder joint
- Articular swelling and synovialitis right shoulder joint
- Lymphadenopathy right axillary lymph nodes
- Normal cervical spine
- Spondylosis deformans T7/T8

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**DATE**

6-17-22

The CT study is fitting the history of surgical stabilization of medial instability of the right shoulder joint. There is evidence of accompanying significant synovialitis and possible joint effusion of the right shoulder joint, suggestive for arthritis. Recommend tapping the right shoulder joint to screen for potential purulent arthritis. If there are signs for infection, implant



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removal is recommended. Due to the beam hardening artefacts, evaluation for potential lucency surrounding the screw(s) is not possible.

Suspect reactive hyperplasia of the right axillary lymph nodes.

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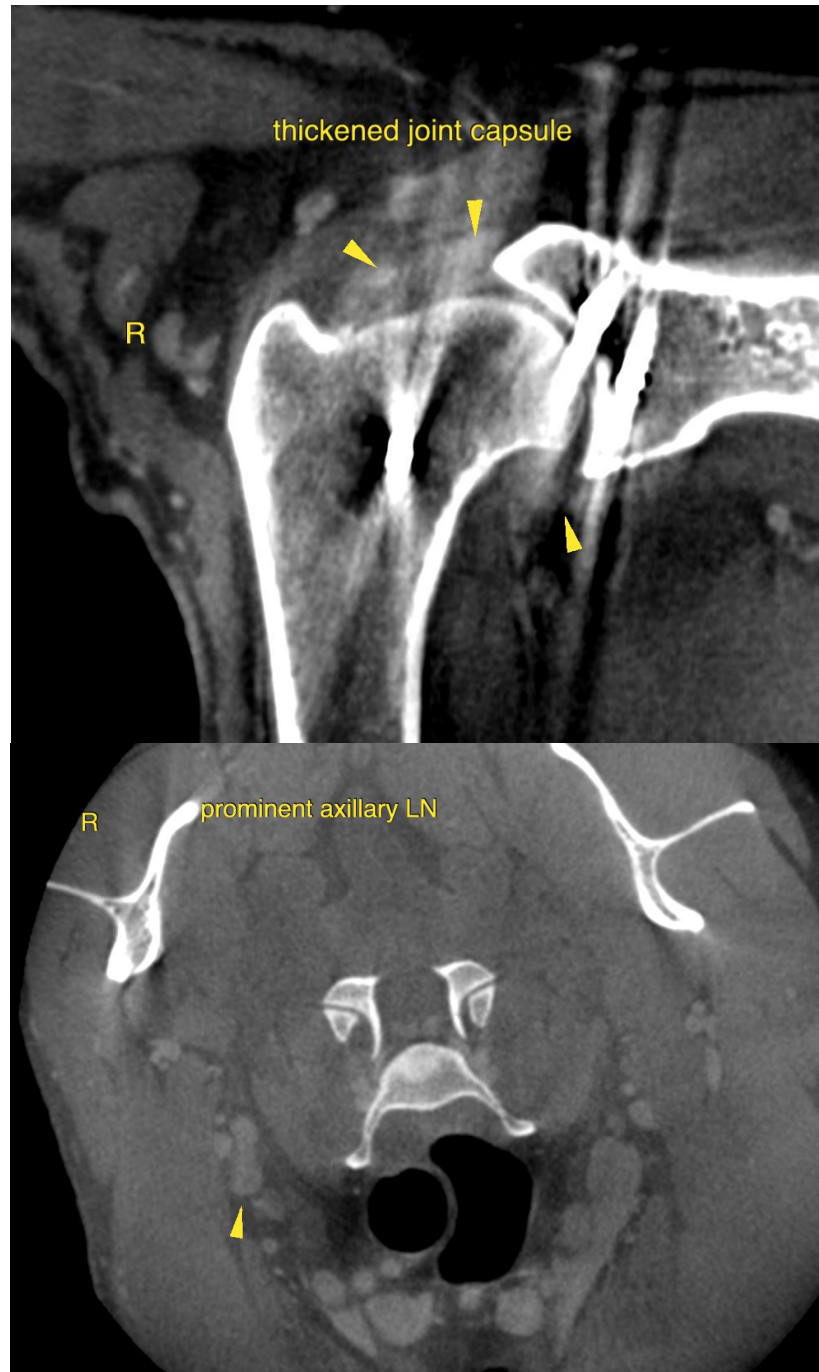
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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