



PATIENT

Nova Bonner County Sheriff's Office

SPECIES

Canine

BREED

Labrador Retriever

SEX

Female Spayed

AGE

6 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVCI

HOSPITAL NAME

North Idaho Animal Hospital (VCA)

REFERRING VET

Dr. Jolee Stegemoller

INVOICE

52764

DATE

7-7-22

PRESENTING CLINICAL SIGNS

Working narcotics detection dog was injured in a vehicular accident on the job in March 2022. Initial injuries have resolved but Nova appears to have residual lameness in her left rear limb. Carprofen and gabapentin help some, but lameness never resolves
Abnormal PE/Chem/CBC/UA Results: Circumduction of left rear limb at the trot, very reluctant to flex left hind limb, holds left hind limb up when jumping up and doesn't use this leg as main "push off" leg when jumping down. Audible click heard on sedated exam but could not localize to stifle or hip. No atrophy of rear limbs.

RADIOGRAPHIC STUDY OF THE ENTIRE SPINE AND HIND LIMBS

A complete set of radiographs of the entire spine and entire hind limbs is provided for review.

RADIOGRAPHIC FINDINGS

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

The intervertebral disc space T12/T13 is moderately narrowed.

The vertebral endplates T13/L1 present mild spondylosis formation.

The remainder of the lumbar spine are within normal limits.

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.

Both stifle joints present smooth osseous margins. In comparison to the right stifle joint, the left stifle joint presents a mild increased volume of the intracapsular soft tissue material.

The osseous and surrounding soft tissue structures of both tarsal joint are within normal limits.

No abnormalities of the hind paws are appreciated.

RADIOGRAPHIC DIAGNOSIS

- Very mild articular swelling left stifle joint
- Discopathy T12/T13

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is evidence of very mild effusion of the left stifle joint without signs for degenerative changes of the osseous structures. As the difference between the right and left stifle joint is only mild it can still present a normal variant. The most common cause for effusion of the stifle joint is pathology of the cranial cruciate ligament ± meniscal injury. Other potentials include degeneration, trauma or unlikely here arthritis (immune mediated versus infectious). Check for signs of instability of the left stifle joint – such as positive drawer sign or tibial compression test. A MRI study of the stifle joint might be used to check for pathology of the intraarticular structures.

The discopathy T12/T13 might or might not be associated with compressive myelopathy, the clinical relevance for the presenting clinical signs is questionable.



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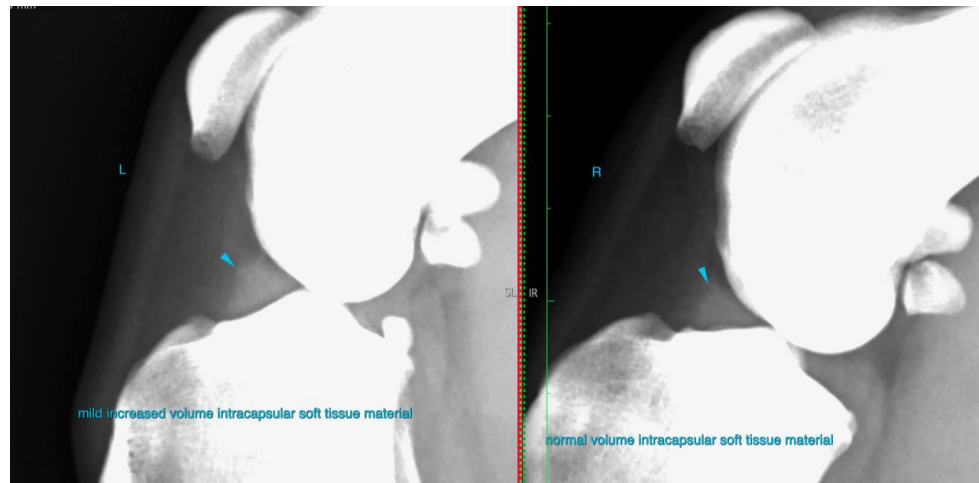
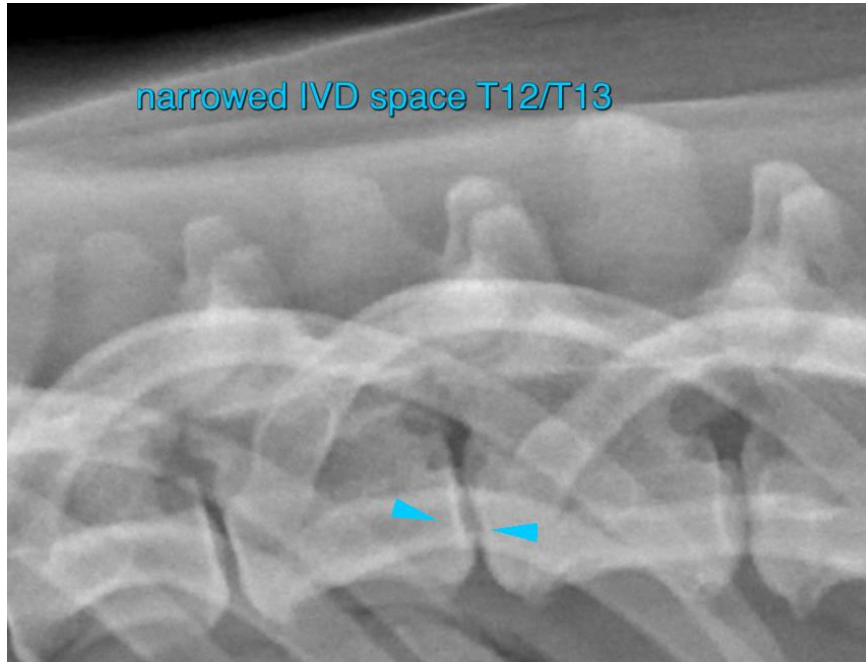
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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