



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Alvin Barr Presented for evaluation of a front end lameness. It was initially noticed 3 months ago. Having some GI upset and doesn't want to go for walks as usual. Alvin current medications Grapiprant 100mg. last one taken last night at 9pm. Alvin is currently eating Pet Value preformatrim kibble.

SPECIES Reacts very negatively to any dairy. **Previous injury as puppy on right front paw from falling down stairs, but recovered well.

SPECIES Canine Abnormal PE/Chem/CBC/UA Results: Front right elbow is painful, yelped on palpation of the medial coronoid and flexion of the elbow Mild discomfort on manipulation of the left elbow GEN: BAR, euhydrated BCS 6/9 EENT: No ocular/nasal discharge, mild gingivitis and calculus, no lenticular or corneal opacities. CV: No murmur/arrhythmia, pulses strong/synchronous, symmetric RESP: No crackles/wheezes INTEG: No masses palpable ABD: No organomegaly, no pain on abdominal palpation MS: Ambulatory x 4 LN: No lymphadenomegaly appreciated Neuro: CP x 4, full neuro not performed. Rectal: Not performed Ortho: forelimbs: No digital crepitus or pain. No pain on shoulder extension or flexion. pelvic limbs: No pain on digital or hock palpation/range of motion. No instability, creptius, or effusion of stifle. No laxity of patella. No pain on hip range of motion or abduction.

BREED

Samoyed

SEX

MN

COMPUTED TOMOGRAPHY OF THE FRONT LIMBS

A plain CT study of the front limbs in a bone and soft tissue reconstruction is provided for review.

AGE

6 Years

COMPUTED TOMOGRAPHIC FINDINGS

At the cranioproximal aspect of the greater tubercle of the left humerus, level with the tendon of the left supraspinatus tendon, multiple small (<4 mm) mineralized bodies are appreciated. Otherwise, both shoulder joints present smooth osseous margins and no additional abnormalities of the surrounding soft tissue structures.

Both elbow joints present smooth osseous margins, the medial coronoid process of the left elbow joint has a homogeneous density. At the most cranial aspect of the tip of the medial coronoid process of the right elbow joint, a small (<2 mm) isolated mineralized body is seen.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Coronoid disease right elbow joint
- Calcifying tendinopathy tendon left supraspinatus muscle - incidental
- Normal left elbow joint

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Animal Health Partners

REFERRING VET

Dr. Jeffery Biskup

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The right elbow joint presents evidence of coronoid disease with a non-displaced small isolated mineralized body, without signs of accompanying degenerative joint disease. As the findings of the clinical examination are supporting the diagnosis of coronoid disease, arthroscopy would be beneficial to revise the right elbow joint.

INVOICE

53577

DATE

8-18-22



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Alvin Barr

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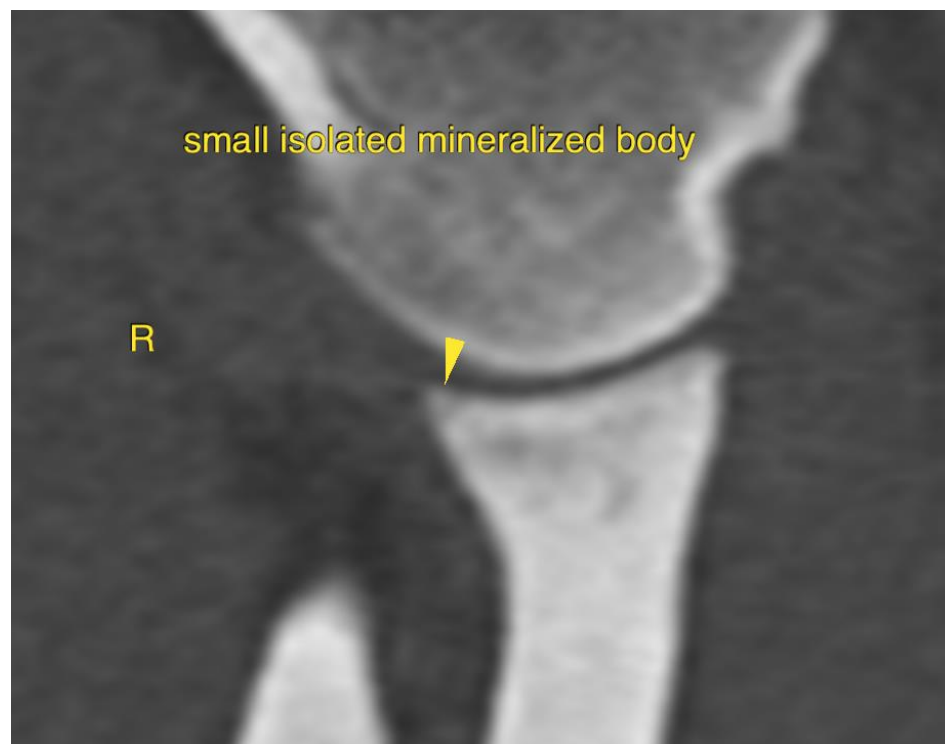
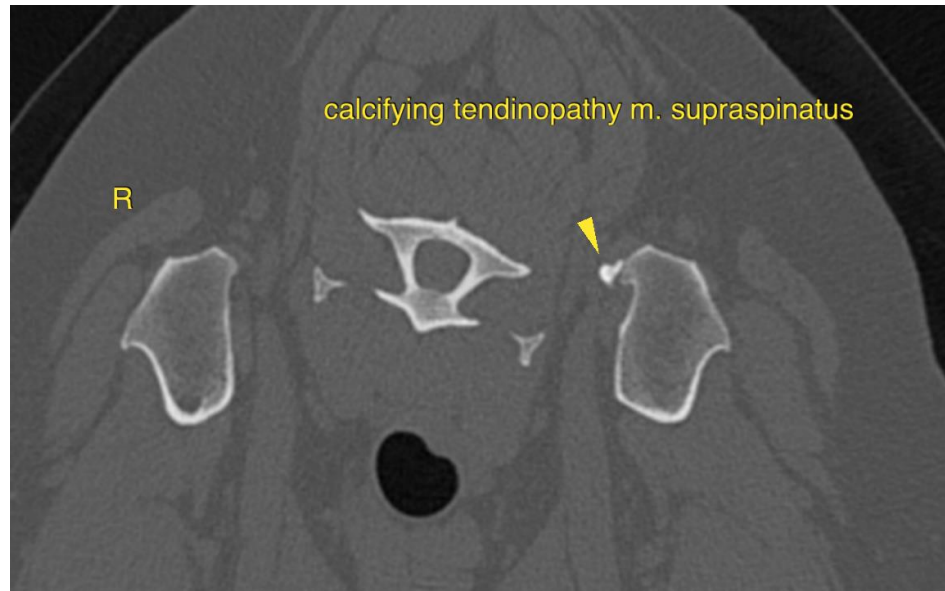
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PATIENT

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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.

SPECIES

Canine

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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