



**PATIENT PRESENTING CLINICAL SIGNS**

Benson Lockhart History: Presented 8-28-22 for evaluation of left thoracic limb lameness. Initially noticed 2 years ago. Cause suspected to be tendinopathy. Was started on meds and laser therapy which did not help lameness.

**SPECIES**

Canine

**MAGNETIC RESONANCE IMAGING OF THE LEFT SHOULDER JOINT**

T2 & PD (including fat saturated sequences) weighted sequences in multiple imaging planes are provided for review.

**BREED**

Bernese Mtn. Dog

**MAGNETIC RESONANCE IMAGING FINDINGS**

The left shoulder joint presents smooth osseous margins. The bicipital tendon has the expected hypointense signal, is homogeneous and has smooth margins. The subchondral bone of the left humeral head presents a small (<1.5mm) roundish PD and T2 hyperintense lesion. The left shoulder joint presents without signs of joint effusion. No abnormalities are appreciated along the course of the glenohumeral ligaments.

**SEX**

Neutered Male

**AGE**

7 Years

**MAGNETIC RESONANCE IMAGING DIAGNOSIS**

- Normal left shoulder joint but small subchondral osseous cyst like lesion

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI

The MR study of the left shoulder joint presents without abnormalities, there is no sign for pathology of the bicipital tendon or rotator cuff injury.

**HOSPITAL NAME**

Animal Health  
Partners

**REFERRING VET**

Dr. Debbie Reynolds

**INVOICE**

17443

**DATE**

9/22/22





**PATIENT**

Benson Lockhart

**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.

**BREED**

Bernese Mtn. Dog

**Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI**  
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