



## PATIENT

Moyo Van Wyk

## SPECIES

Canine

## BREED

Labrador Retriever

## SEX

FI

## AGE

5M

## WEIGHT

45lbs

## INTERPRETED BY

Tilde Rodrigues Froes,  
DMV, MSc., Dr. Med  
Vet., Dipl. CBraRVet

## IMAGING PERFORMED BY

Dr. Amanda Causey

## HOSPITAL NAME

Heron Lakes Animal  
Hospital

## REFERRING VET

Dr. Lera

## INVOICE

73688

## DATE

2-10-26

## PRESENTING CLINICAL SIGNS

- Rear limb stiffness and lameness. Holds right rear limb up while standing.
- Slow to rise
- Stiffness and on/off lameness for past few weeks
- r/o OCD lesions vs other pathology

Abnormal PE/Chem/CBC/UA Results: Radiographs - Soft tissue swelling at the level of the left proximal tarsus/talocrural joint can be due to soft tissue injury or underlying development orthopedic disease. Decreased size and flattening of the right and left trochlear ridges of the patellae is suspected, which would be consistent with osteochondrosis.

## COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN, THORACIC LIMBS AND PELVIC LIMBS

A pre- and post-contrast CT study of abdomen, thoracic and pelvic limbs are provided for review totaling 4 series. One pre-contrast series of the thoracic limbs (bone algorithm). One post-contrast series of the thoracic limbs (soft tissue algorithm). One pre-contrast series of the pelvic limbs (bone algorithm). One post-contrast series of the pelvic limbs & abdomen (soft tissue algorithm).

## COMPUTED TOMOGRAPHIC FINDINGS

### Right Shoulder, Elbow Joint & Carpus

The scapulohumeral joint is within normal limits. The scapula and humerus are within normal limits

The humeral condyles demonstrate normal morphology and attenuation.

The medial coronoid process is within normal limits.

The anconeal process and trochlear notch are unremarkable.

On dorsal and sagittal reformatted images, the humeroulnar and humeroradial joints are congruent.

The antebrachial, carpal, metacarpal and phalanx are within normal limits.

### Left Shoulder, Elbow Joint & Carpus

The scapulohumeral joint is within normal limits. The scapula and humerus are within normal limits

The humeral condyles demonstrate normal morphology and attenuation.

The medial coronoid process is within normal limits.

The anconeal process and trochlear notch are unremarkable.

On dorsal and sagittal reformatted images, the humeroulnar and humeroradial joints are congruent.

The antebrachial, carpal, metacarpal and phalanx are within normal limits.

### Pelvis & Stifle Joints



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The coxofemoral joints are congruent, with normal femoral head coverage.

The pelvic bones and sacroiliac joints are unremarkable.

The patellae are normally positioned within the trochlear grooves.

The femoral condyles and femoral trochlear grooves are within normal limits.

### Left Tarsocrural – Tarsal Joints

The medial trochlear ridge of the talus demonstrates mild heterogeneity and subtle hypoattenuation, with mild flattening of its contour.

There is subtle widening of the tarsocrural joint space.

No mineralized cartilage flap or free intra-articular fragment is identified.

### Right Tarsocrural – Tarsal Joints

The medial trochlear ridge of the talus demonstrates similar mild heterogeneity and subtle flattening with hypoattenuation.

Mild widening of the tarsocrural joint space is noted.

No distinct mineralized flap or intra-articular fragment is identified.

### Abdomen

The liver is normal in size, shape, and attenuation, with homogeneous contrast enhancement.

The gallbladder, cystic duct, and common bile duct are within normal limits.

The spleen is normal in size and attenuation, with uniform contrast enhancement.

The stomach and small and large intestines are normally positioned and appropriately distended, with no evidence of wall abnormalities.

The pancreas is within normal limits.

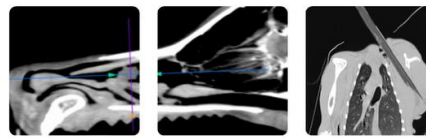
The kidneys are normal in size, shape, and attenuation. The renal pelvis and ureters are unremarkable.

The urinary bladder is moderately distended with fluid attenuation content and has normal wall thickness.

The uterus and ovaries are not visible.

No abdominal lymphadenomegaly or peritoneal effusion is identified.

The serosal fat demonstrates normal attenuation.



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## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Bilateral mild flattening and heterogeneity of the medial trochlear ridges of the tali, consistent with early or incipient osteochondrosis (OCD). No mineralized flap is identified.
- Shoulder joints: Within normal tomographic limits bilaterally.
- Elbow joints: No tomographic abnormalities detected bilaterally.
- Coxofemoral and stifle joints: Within normal limits.
- Unremarkable abdominal study.

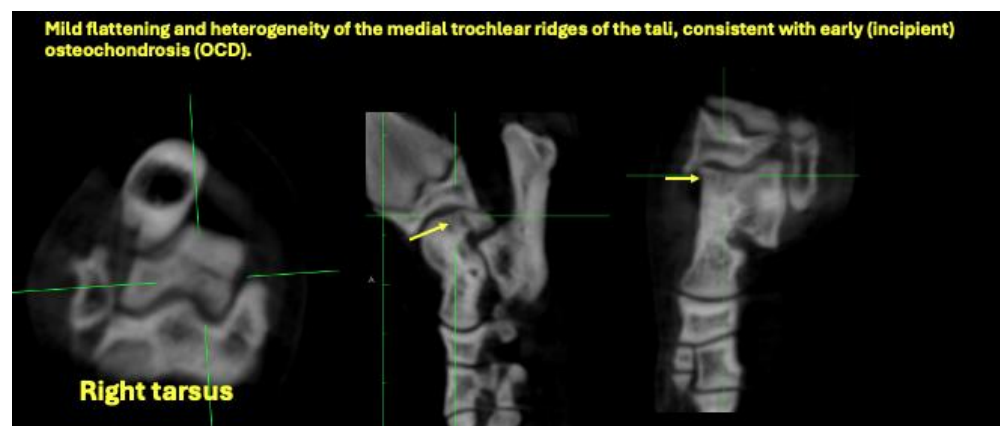
## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Both tarsocrural joints demonstrate subtle morphological changes of the medial trochlear ridges of the talus, compatible with early stage osteochondrosis.

Correlation with orthopedic examination findings is recommended.

Referral for orthopedic consultation is advised to determine the most appropriate therapeutic approach.

The coxofemoral joints are congruent; however, for objective assessment of hip laxity (distraction index), PennHIP radiographs are recommended at or beyond 6 months of age.





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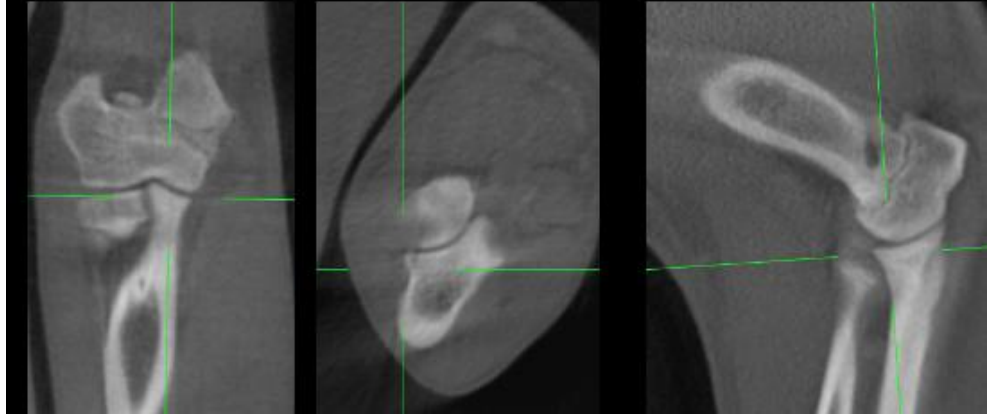
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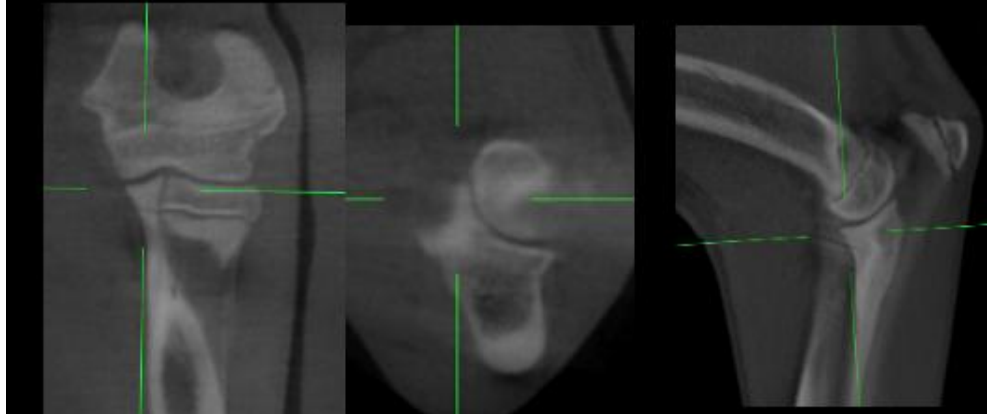
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### Normal right elbow



### Normal left elbow





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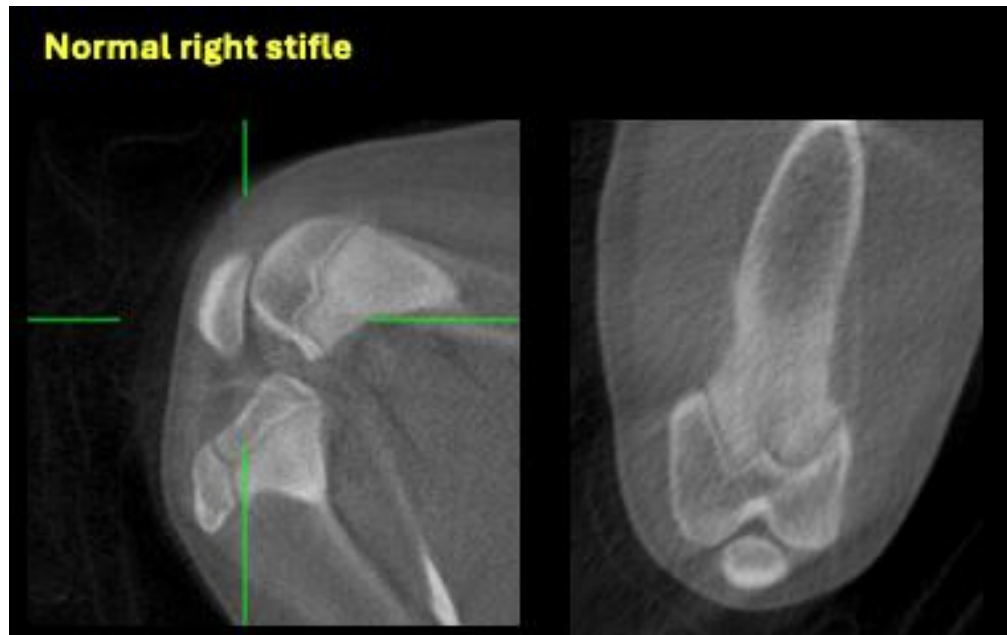
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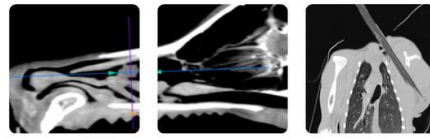
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Tilde Rodrigues Froes, DMV, MSc., Dr. Med.Vet., Dipl.CBraRVet  
[info@sonopath.com](mailto:info@sonopath.com)