



PATIENT

Cleo Jenkins

SPECIES

Canine

BREED

Greyhound

SEX

FN

AGE

5

WEIGHT

30

INTERPRETED BY

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

IMAGING PERFORMED BY

Eamon

HOSPITAL NAME

Belconnen Veterinary
Centre

REFERRING VET

Eamon

INVOICE

74610

DATE

4-15-26

PRESENTING CLINICAL SIGNS

left fore limb lameness

duration 1 wk

no known trauma

Abnormal PE/Chem/CBC/UA Results: cbc/chem/t4 pending

COMPUTED TOMOGRAPHIC STUDY OF THE THORACIC LIMBS

Pre- and post-contrast series of the thoracic limbs and cervical spine are provided for review. One pre-contrast series soft tissue algorithm. One pre-contrast series bone algorithm. One pre-contrast series lung algorithm. One post-contrast series soft tissue algorithm.

COMPUTED TOMOGRAPHIC FINDINGS

LEFT THORACIC LIMB

Multiple small, well-defined mineral attenuating foci are identified within the region of the supraspinatus tendon and biceps brachii tendon, measuring approximately 4.7–7.1 mm.

The scapulohumeral joint is congruent, with no evidence of articular effusion or periarticular swelling.

The humeroradial and humeroulnar joints are unremarkable. The medial coronoid and anconeal processes are intact.

The scapula, humerus, radius, and ulna are within normal limits.

No evidence of traumatic or aggressive osseous lesions.

RIGHT THORACIC LIMB

A solitary small mineral attenuating focus is present within the region of the biceps brachii tendon.

The scapulohumeral joint is congruent, with no evidence of articular swelling.

The humeroradial and humeroulnar joints are within normal limits. The medial coronoid and anconeal processes are intact.

No evidence of traumatic or aggressive osseous lesions.

CERVICAL SPINE

The cervical vertebrae (C1–C7) are normal in number, size, shape, and attenuation.

Vertebral alignment is preserved (mild obliquity attributed to positioning).

The atlantoaxial articulation and odontoid process are normal.

Intervertebral disc spaces are maintained.

Articular facets and vertebral canal are within normal limits.



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No evidence of osseous trauma or aggressive lesions.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

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- Multifocal mineralization of the supraspinatus and biceps brachii tendons in the left thoracic limb, and focal mineralization of the right biceps brachii tendon. Differential diagnoses include are bilateral calcific tendinopathy (supraspinatus and bicipital tendinopathy), more pronounced on the left side.

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- No evidence of elbow dysplasia, or osseous abnormalities in either thoracic limb.
- Unremarkable cervical spine.

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FN

The identified mineralized foci within the supraspinatus and biceps brachii tendons, particularly on the left side. Differential diagnosis includes tendinopathy. These lesions may or may not be clinically significant because mineralized foci do not always result in clinical signs and may represent an incidental finding.

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Correlation with an orthopedic examination is recommended. Musculoskeletal ultrasound is advised to assess tendon fiber integrity, evaluate the degree of inflammation, and guide potential therapeutic interventions.

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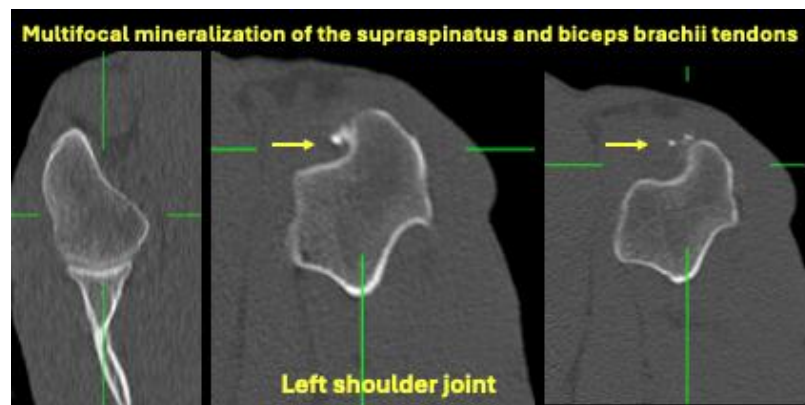
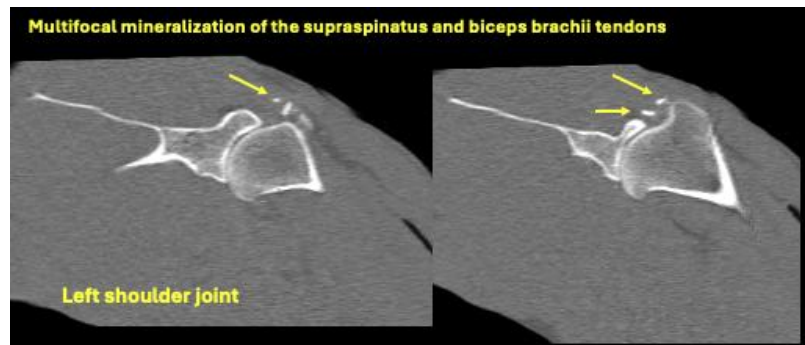
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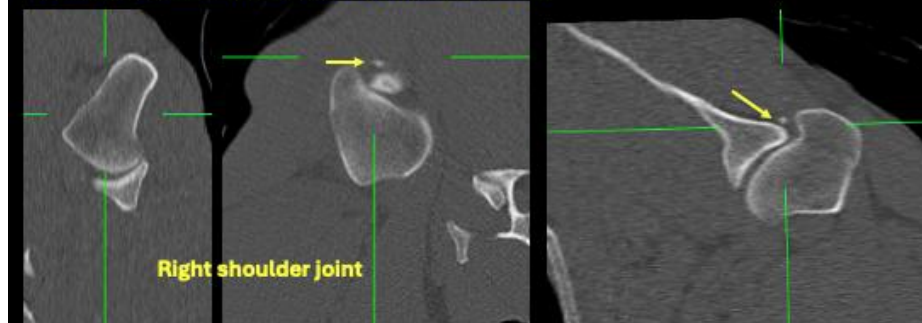
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4-15-26

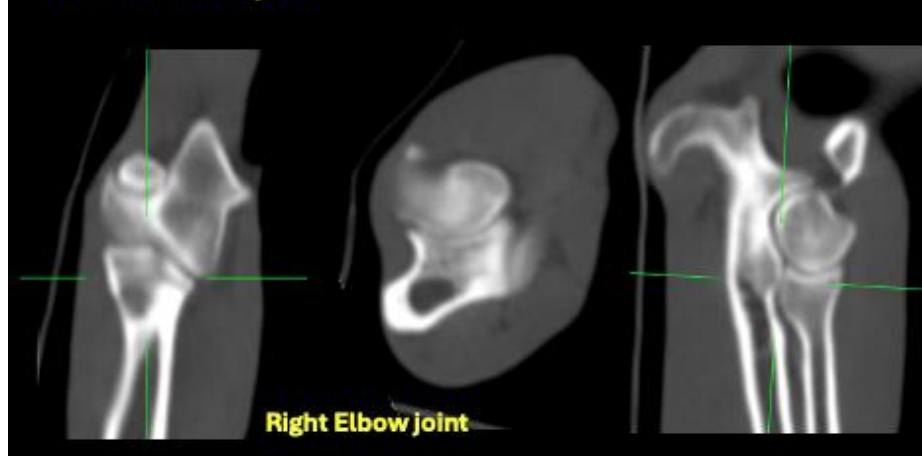
Normal elbow joints



Focal mineralization of the biceps brachii tendon



Normal elbow joint





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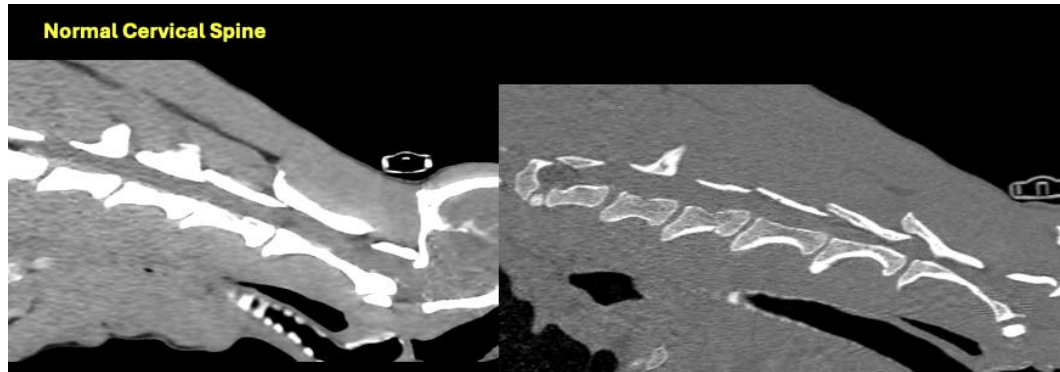
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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