



## PATIENT

Ray McCullough

## SPECIES

Canine

## BREED

French Bulldog

## SEX

MN

## AGE

4Y

## WEIGHT

40lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Amanda Hartman,  
DVM

## HOSPITAL NAME

White Hall Animal  
Clinic

## REFERRING VET

Amanda Hartman,  
DVM

## INVOICE

74693

## DATE

4-17-26

## PRESENTING CLINICAL SIGNS

Historical trauma to left shoulder, still showing limping, developed hygroma on R elbow afterwards (o suspects from shifting weight)

Abnormal PE/Chem/CBC/UA Results: pain with shoulder ROM on left; pain with cranial lumbar palpation and negative CP in both hind legs; does have stifle hyperextension as well; no pain with cervical ROM; no changes in front legs. Systemic contrast given; NOT myelogram

## COMPUTED TOMOGRAPHIC STUDY OF THE THORACIC & LUMBAR SPINE, AND SHOULDER JOINTS

Pre and post-contrast computed tomographic study of the thoracic spine, lumbar spine and shoulder joints are provided for review, totaling 6 series, including transverse images acquired using bone algorithms.

## COMPUTED TOMOGRAPHIC FINDINGS

### RIGHT SHOULDER

The scapulohumeral joint is within normal limits, with no evidence of articular effusion or swelling.

The scapula and proximal humerus are unremarkable.

The adjacent soft tissues are within normal limits.

### LEFT SHOULDER

The scapulohumeral joint is within normal limits, with no evidence of articular effusion or swelling.

The scapula and proximal humerus are unremarkable.

The adjacent soft tissues are within normal limits.

### SPINE

Normal vertebral formula (T1–T13, L1–L7, sacrum).

The vertebral bodies and articular facets are normal in size, shape, and attenuation.

Intervertebral disc spaces and vertebral canal are within normal limits.

No evidence of vertebral fracture, subluxation, or aggressive osseous lesion.

The thoracic and lumbar epaxial musculature is unremarkable.

Incidental / Partially Collimated Findings

Within the partially imaged left elbow, there is a chronic intercondylar humeral fracture without evidence of joint incongruity. The medial coronoid process shows mild apical irregularity.

Within the partially imaged head, the left tympanic cavity is fluid-filled.



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## COMPUTED TOMOGRAPHIC DIAGNOSIS

- No tomographic abnormalities identified in the shoulder joints.
- Unremarkable thoracic and lumbar spine.
- Chronic intercondylar fracture of the left humerus, without elbow incongruity. Differential diagnoses include incomplete ossification of the humeral condyle (IOHC)
- Mild irregularity of the medial coronoid process. Differential diagnosis: consider early or mild concurrent medial coronoid disease.
- Left tympanic cavity fluid accumulation. Differential diagnosis incidental fluid accumulation, less likely otitis media.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No CT abnormalities are identified in the shoulder joints or thoracolumbar spine that would account for the reported forelimb lameness or lumbar pain.

The thoracic and lumbar spine are unremarkable. However, CT has limited sensitivity for detecting non-mineralized disc disease and intrinsic spinal cord disorders. Differential diagnoses such as non-mineralized intervertebral disc extrusion, acute non-compressive nucleus pulposus extrusion (ANNPE), fibrocartilaginous embolism (FCE), or other intramedullary spinal cord diseases cannot be excluded based on CT findings alone.

MRI of the spine may be considered for further evaluation of non-osseous causes. MRI of the thoracolumbar spine is recommended, particularly if the neurological deficits persist or worsen.

Fluid is present within the left tympanic cavity. Differential diagnoses include incidental fluid accumulation; otitis media is considered less likely.

The chronic intercondylar fracture of the left humerus is identified in the border of this study. Differential diagnoses include incomplete ossification of the humeral condyle (IOHC). This finding may be clinically relevant, depending on orthopedic evaluation and correlation with the clinical history. An orthopedic consultation is recommended.

## TECHNICAL COMMENTS

Although evaluation of the elbow joints was not the primary objective of this study, the region was partially included in the field of view, and a chronic intercondylar fracture of the left humerus was identified. This finding may be clinically relevant and has therefore been included in this report.



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### Normal Right shoulder



### Normal Left shoulder





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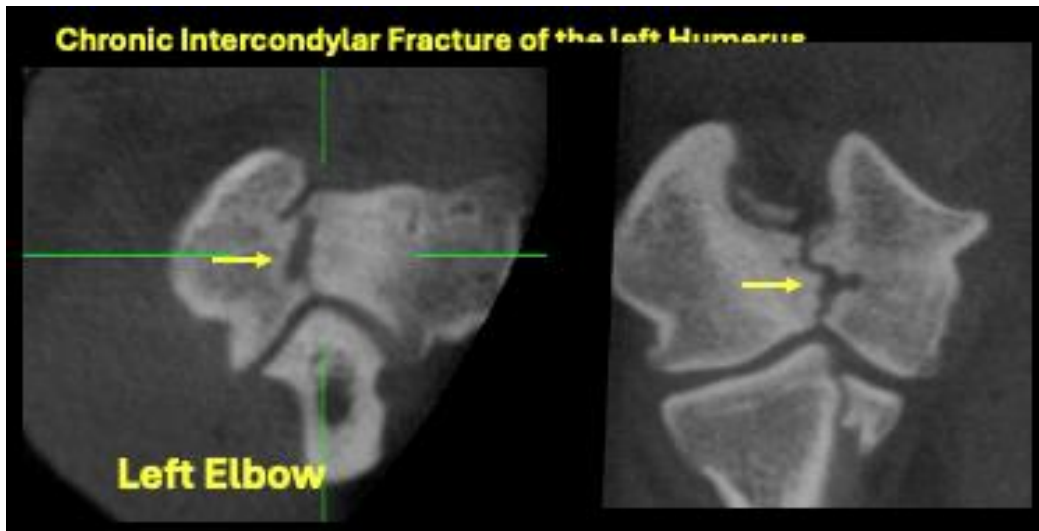
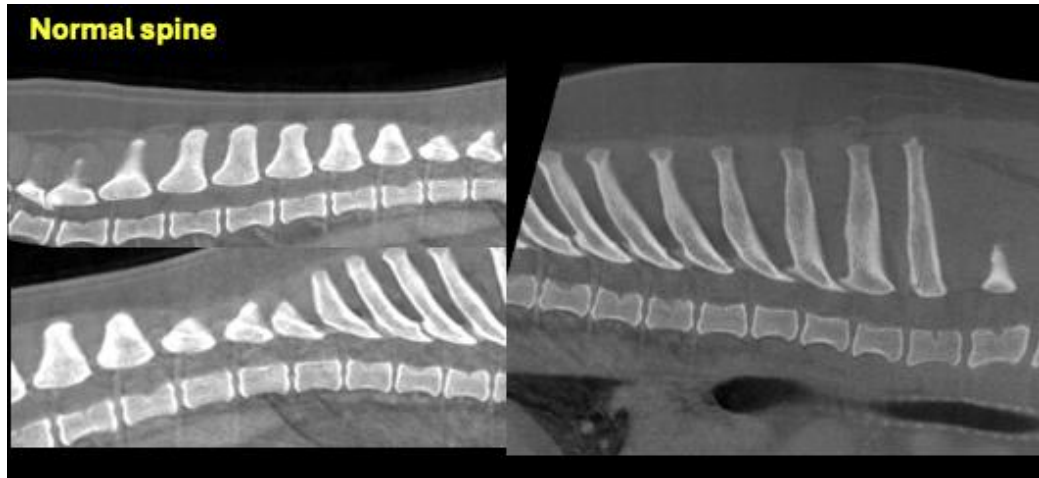
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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