



PATIENT

Lola Hunt

SPECIES

Canine

BREED

Boxer Mix

SEX

SF

AGE

6Y

WEIGHT

64lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Jen Amidon

HOSPITAL NAME

The Pet Hospital of
Stratford

REFERRING VET

Dr David

INVOICE

75089

DATE

5-21-26

PRESENTING CLINICAL SIGNS

Pt has hx of fractured D4 P2 of rt hind paw at end of March. Pt was splinted for a month, and at that recheck xray it was noted that it was in the reparation phase. Pt has now been without a splint for a month, using the leg fairly comfortably, only showing sensitivity occasionally.

RADIOGRAPHIC STUDY OF THE RIGHT HIND PAW

Radiographs of the right hind paw in two orthogonal planes are provided for review. Comparison: Prior radiographs 03/20/2026 and 04/16/2026 (SonoPath)

RADIOGRAPHIC FINDINGS

The middle phalanx of the right fourth (4th) digit presents residual fracture line at the diaphysis, consistent with the previously documented oblique fracture. Exuberant periosteal callus formation surrounds the fracture site, resulting in moderate amorphous cortical thickening of the diaphysis.

Mild-to-moderate circumferential soft tissue swelling of the fourth digit persists, attributed to the adjacent callus volume.

The remaining osseous and soft tissue structures of the right hind paw reveal no abnormalities.

RADIOGRAPHIC DIAGNOSIS

- Healing oblique diaphyseal fracture, middle phalanx, fourth (4th) digit, right hind paw, continuing reparation phase with exuberant callus formation.
- Persistent mild-to-moderate soft tissue swelling, fourth digit, likely secondary to callus volume.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The fracture of the middle phalanx of the fourth digit is progressing toward healing, continuing reparation phase with exuberant callus formation. The fracture line still visible, and the exuberant callus formation is likely correlate to excessive mobility of the region. It is possible that the persistent visible line is correlated to non-mineralized fibrous callus formation.

Continued conservative management is appropriate given the patient's functional weight-bearing and clinical improvement. Radiographic recheck in 6 weeks is recommended to confirm fracture bridging and callus remodeling. If lameness worsens or sensitivity increases, orthopedic re-evaluation is advised.



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Fig.1. Marked periosteal callus formation surrounding the discrete fracture site of the 4th digit of the Right Hind Paw



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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