



PATIENT PRESENTING CLINICAL SIGNS

Peanuts Chackes Intermittent lameness right thoracic limb and difficulty rising from rest, hind limbs
Abnormal PE/Chem/CBC/UA Results: WNL

SPECIES RADIOGRAPHIC STUDY OF THE RIGHT THORACIC LIMB AND PELVIS

Canine Orthogonal views of the right thoracic limb and pelvis are available for review, totaling 2 images. One cranial caudal view of the right thoracic limbs, focus on carpal joint. One ventrodorsal view of the pelvis.

BREED RADIOGRAPHIC FINDINGS

Goldendoodle RIGHT THORACIC LIMB

A small, solitary, sharply bridged (spur), smooth, periosteal reaction is seen at the lateral border of the right ulna, no other cortical lesion or opacity changes are identified.

SEX

Male Neutered There is a mild increase in the medial border of the antebrachial soft tissue volume and carpal joint. No osteolytic osseous changes are seen in carpal bones.

AGE

7 Years The metacarpus and phalanxes of all digits are unremarkable.

PELVIS

The coxofemoral joints are incongruent, bilaterally.

INTERPRETED BY

Mild circumferential periarticular osteophytes at the femoral heads is noted.

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

The femoral necks are mildly thickened and a traversed by a thin sclerotic curvilinear line of enthesophytes.

No aggressive osseous lesion is identified.

HOSPITAL NAME

New Bridge Veterinary Practice

RADIOGRAPHIC DIAGNOSIS

- Monostotic benign osteoproliferative lesion blending into the regular cortex of the distal right ulna, benign lesion.
- Mild right antebrachial and carpal joint swelling. The differential diagnosis includes soft tissue strain, soft tissue trauma, right abductor pollicis longus tendinopathy, likely correlated to joint instability.
- Bilateral coxofemoral incongruency, and mild secondary osteoarthritis.

REFERRING VET

Dr. Abina Glennon

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

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The monostotic lesion in the right thoracic limb likely represents an osteochondroma and/or exostosis. It is a non-aggressive lesion. Involvement of the extensor carpus ulnaris muscle, a continuous trauma, could be correlated to this lesion. Concurrent antebrachial and carpal swelling are noted. Both lesions could be correlated to the present clinical sign. Consider conservative management, pain management, and anti-inflammatory drugs. If the patient does not improve, a musculoskeletal ultrasound exam and if attainable, fine-needle aspiration of the carpal joint is suggested.

DATE

8-16-23



PATIENT The coxofemoral incongruity and mild secondary osteoarthritis explains the present clinical orthopedical signs of difficulty rising.

Peanuts Chackes

SPECIES

Canine

BREED

Goldendoodle

SEX

Male Neutered

AGE

7 Years

INTERPRETED BY

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HOSPITAL NAME

New Bridge
Veterinary Practice

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Peanuts Chackes

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Canine

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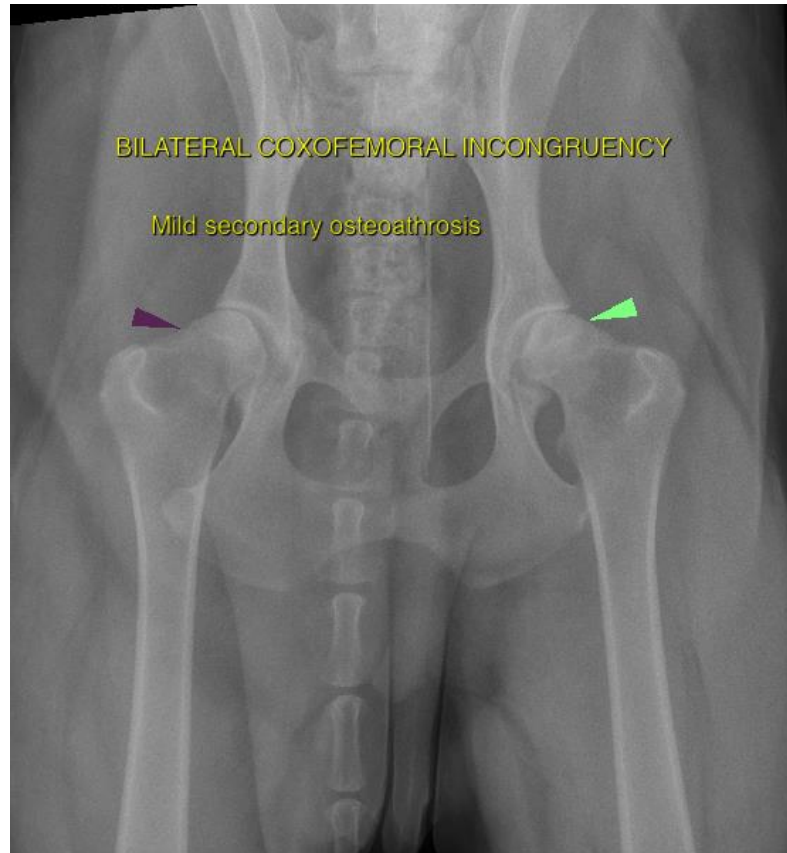
Dr. Abina Glennon

INVOICE

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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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