



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Pippy Rice 13 week old F setter puppy presented 7/27 with a two day history of intermittent right hind limb lameness. No known trauma but does rough house with an older/bigger dog in the house. On presentation pain was elicited with manipulation of the right stifle. Possible laxity in the stifle noted.

**SPECIES** Other joints/long bones palpated normally with normal ROM. Owner initially declined radiographs so the patient was sent home on NSAIDS and strict rest. Re-presented on 8/1 for sedated radiographs.

**Canine** Potential laxity in the knee when manipulated but difficult to assess due to age and general increase in laxity. Limited weight bearing on the right hind after manipulation.

**BREED RADIOGRAPHIC STUDY OF THE PELVIC LIMBS**

**Setter** Orthogonal views of the pelvic limbs are provided for review, totaling 3 images. One ventrodorsal/craniocaudal view, two lateral view focus on stifle joints.

**SEX RADIOGRAPHIC FINDINGS**

**Female Intact** **RIGHT STIFLE**  
A small, rounded, faint mineral intraarticular osseous body is seen overlying the stifle fat-pad and it is seen only in one of the lateral views. However, no evidence of femoral condyle irregularities or defects.

**AGE** 4 Months  
There is articular swelling of the right stifle joint, with increased volume, extending caudally, and cranially from normal margins, and is compressing the caudal 20-30% of the infrapatellar fat pad.

The patella is in a topographically normal position.

**INTERPRETED BY**

**LEFT STIFLE**  
A thin, faint, linear mineral intraarticular osseous body is seen overlying the stifle fat-pad. However, no evidence of femoral condyle irregularities or defects.

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

The fat-pad opacity is normal.

**HOSPITAL NAME** The patella is in a topographically normal position.

East Bend Animal Hospital

**RADIOGRAPHIC DIAGNOSIS**

**REFERRING VET**

Anna Kilgore

- Mild right stifle joint synovial swelling and identification of a small sized, faint opacity, intraarticular osseous body. The differential diagnosis includes suspect of cranial cruciate ligament avulsion, intercondylar osteochondrosis dissecans. The origin of the fragment cannot be ascertained.
- Left stifle linear, mineral, faint opacity, intraarticular osseous body. The differential diagnosis includes intercondylar osteochondrosis dissecans, imaging artifact.

**INVOICE INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**59624** The radiographic findings are correlated to the patient's history and indicate a suspicion of cranial cruciate ligament avulsion or intercondylar osteochondrosis dissecans, especially within the right stifle joint. However, because no defect of the femoral condyles is identified, the origin of the fragment cannot be ascertained. The next recommendation is a computed tomography exam to ascertain the origin of the presumed fragment with greater accuracy and confirm the present lesion. At the same

**DATE**

8-2-23



**PATIENT** Pippy Rice  
time, perform a specific orthopedic exam under general anesthesia, for example, cranial drawer or tibial thrust tests. In addition, the computed tomographic exam can confirm the presumed lesion on the left stifle joint.

**SPECIES**

Canine

**BREED**

Setter

**SEX**

Female Intact

**AGE**

4 Months

**INTERPRETED BY**

Tilde Rodrigues Froes,  
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Vet., Dipl. CBraRVet

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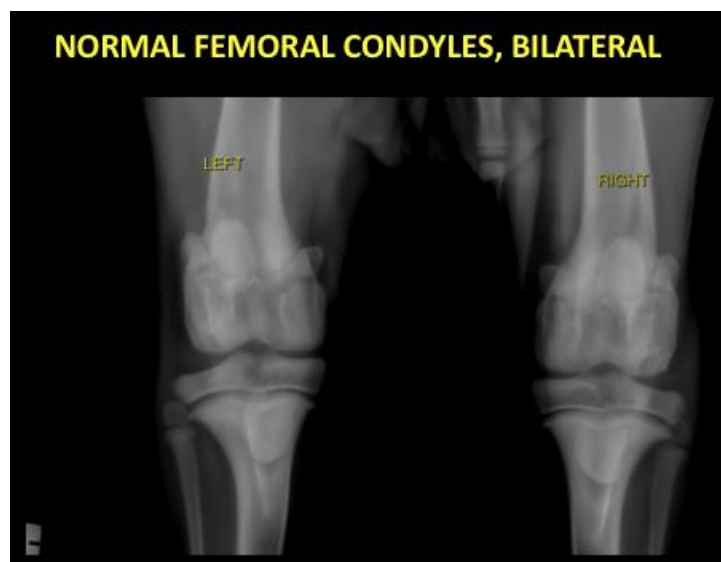
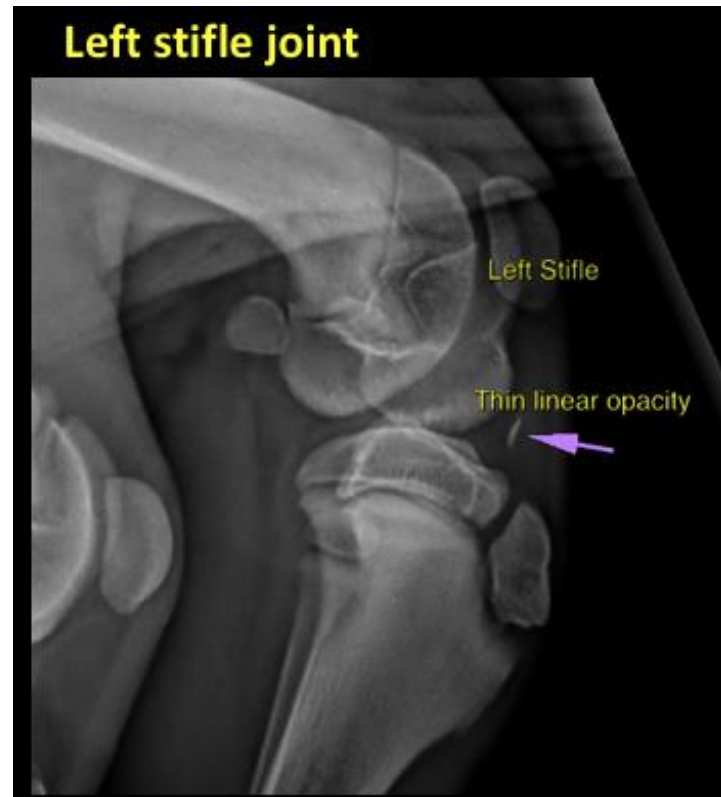
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**PATIENT** The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.  
Pippy Rice

**SPECIES** 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.

Canine  
**Tilde Rodrigues Froes, DMV, MSc., Dr. Med.Vet., Dipl.CBraRVet**  
info@sonopath.com

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Setter

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