

RADIOLOGY CONSULTATION (Finalized)

Western College of Veterinary Medicine
University of Saskatchewan, Saskatoon S7N 5B4

Cage/Stall#: _____
Time Required: NOV 13/03
Clinician: FARROW, CHUCK
WCVM Rads: NO
Referral Rads: NO Date: 13-Nov-03
Sedation Allowed: NO
Drug/Dose: _____

PETERSON, SUE
BOX 7 SITE 508 RR 5
SASKATOON, SK
S7K3J8
Res: (306) 867-8067 Bus: () 222-7999
THRUD
SHEEPDOG, OLD ENGLISH
DOB: 01/01/03 FEMALE

HIND LIMB: (Left and Right) Hip

COMMENTS:

SUMMARY OF HISTORY AND CLINICAL FINDINGS:
NORMAL

Charge: \$53.00

TENTATIVE DIAGNOSIS:
NORMAL

RADIOGRAPHIC INTERPRETATION:

Preliminary Hips:

Normal hips.

Radiologist's Note - Three films of this dog's hips were made.

Two of them were abnormally angled and showed what appeared to be subluxation of the left hip. The fact that both of the angle projections were nearly identical but made by different people, suggested it was a position being assumed by the animal—one in which the dog was willing to let them extend the right, but not the left leg.

It wasn't until we modified the positioning of the dog, to include less traction on the limbs, that we were able to get a symmetrical view—the one which showed the hips to be normal on both sides.

Additionally, all three views show two small mineralized objects midway between the caudal acetabulum and lesser trochanter of the left femur.

Discussing this with the owner, I learned the dog was lame on the left side. I mention that densities such as the ones described near the dog's proximal left femur, may be of no consequence, or alternatively, related to an injury such as avulsion fracture of the lesser trochanter or dystrophic calcification in a tendon or muscle. I pointed out that the dog's discomfort might also be due to an abnormal hip, although as already mentioned, the modified extended VD showed both hips to be normal. I discussed the effects of a push-pull maneuver, and the fact that we may have revealed a mild dislocation in the left hip as a result.



CHUCK FARROW
BSc DVM

NOTE: Please notify the radiology section if the above report is not in accord with Clinical, Surgical or Neopsy findings.