

Patient Information

Patient:	██████	Patient ID:	██	Report Number:	31675
Patient Birth Date:	██████	Age:	██	Gender:	F
Study Description:	SCRAPBOOK od 2.11.21	Accession:		Study Date:	20210226
Species:	Exotics	Breed:	Other	Modalities:	DX
Sedation Used:	No	Anesthesia Used:	No	Submitted By:	██████
Facility:	██████████	Submitted:	2021-02-26 17:31:44 UTC	Finalized:	2021-04-12 21:48:33 UTC

Annotated Images Requested: Yes

STAT Request: 0

Anatomical Region: Distal limbs and feet

History

This was a routine imaging study; this patient has no clinical lameness or other conditions in treatment. I am concerned at the changes in her R tarsus and am hoping you can give us some insight into the changes associated with that joint. I am easily able to repeat images if additional views or angles are indicated. Thank you!
 Retired from circus

Findings

8 images dated February 26, 2021 of the patient with an ID of ████████████████████. The image quality is good. Digits are labeled when appropriate and compared to previous images for labeling. The study will be compared to multiple previous studies; the most recent previous study July 15, 2020.

Image 1 (Right forelimb):

Digit 3 - there is a faint linear lucency within the medial parasagittal aspect of P3. The medial aspect of P2 remains irregular; the defect extends from the non-articular proximomedial aspect to the non-articular distomedial aspect. The amount of osseous proliferation at the medial aspect of P2 is similar. The proximal and distal interphalangeal joint articular margins are smooth. The metacarpophalangeal joint has smooth articular margins.
 Digit 4 - there is a single center of ossification for the P3. The P2 and P3 are within normal limits; the proximal and distal interphalangeal joint articular margins are smooth.

Images 2 & 3 (Carpus - left):

There are similar small osteophytes on the dorsal portions of the antebrachiocarpal joint, middle carpal joint, and carpometaacarpal joints.

Image 4 (Right hindlimb):

Digit 2 - P3 is not distinguished. The distal articular margin of P2 is smooth. The proximal interphalangeal joint and metatarsophalangeal joint articular margins are smooth.
 Digit 3 - there is a single center of ossification for the P3. The proximal and distal interphalangeal joint articular margins are smooth. There is no longer a round mineral opacity distolateral to P2. The metatarsophalangeal joint articular margins are smooth.
 Digit 4 - there is a single center of ossification for the P3. The proximal and distal interphalangeal joint articular margins are smooth. metatarsophalangeal joint articular margins are smooth.
 Digit 5 - the proximal interphalangeal joint articular surfaces are smooth.

Image 5 (Oblique lateral of the proximal metatarsal region - Right)

There are lobular osteophytes on the margins of the tarsometatarsal joints. The distal row of tarsal bones are sclerotic.

Image 6 (Left hindlimb):

Digit 2 - the P3 is indistinct. The distal aspect of P2 is smoothly marginated. The proximal interphalangeal joint

articular margins are smooth.

Digit 3 - there is a single center of ossification for the P3. The proximal and distal interphalangeal joint articular margins are smooth. The metatarsophalangeal joint has smooth articular margins.

Digit 4 - There is a persistent increased distance of P3 relative to P2; the articular aspects are smooth. The P3 is a single-center of ossification. The P3 is distally displaced. The articular margins of the proximal interphalangeal joint are smooth. The metatarsophalangeal joint has smooth articular margins.

Digit 5 - the P3 is indistinct. The distal aspect of P2 is smoothly marginated. The proximal interphalangeal joint articular margins are smooth.

Image 7 (Oblique lateral of the proximal metatarsal region - Left)

There are lobular osteophytes on the margins of the tarsometatarsal joints. The distal row of tarsal bones are sclerotic with heterogeneous bone within the medullary cavity. The degenerative changes are on the dorsal and plantar aspects. There are also moderate degenerative changes of the distal intertarsal joint.

Image 8 (Left forelimb):

Digit 2 - The proximal and distal interphalangeal joint articular margins are smooth.

Digit 3 - there is a single center of ossification for the P3. There is a similar round lucency within the central portion of P2; the rim is sclerotic. The proximal and distal interphalangeal joint articular margins are smooth. Mineral debris is superimposed on the distal cutaneous portion of the of the digit. The metacarpophalangeal joint has smooth articular margins.

Digit 4 - there is a single center of ossification for the P3. The P2 and P3 are within normal limits; the proximal interphalangeal joint articular margins are smooth. The metacarpophalangeal joint has smooth articular margins.

Impressions

1. Static chronic healed P2 fracture of the right front digit 3; the fracture is non-articular affecting the medial aspect of P2.
2. Persistent P3 luxation of the left hind digit 4 at the distal interphalangeal joint.
3. Static left front digit 3 P2 osseous cyst like lesion or bone cyst.
4. Moderate bilateral metatarsophalangeal joint degenerative joint disease. Moderate left distal intertarsal degenerative joint disease.
5. Right forelimb digit 3 P3 bipartite bone; less likely chronic healed fracture.
6. Minimal left antebrachiocondylar joint, middle carpal joint, and carpometacarpal joint.

Recommendations

Pathologies are overall static compared to previous studies.

Not included in the recheck images:

- Left ulnar carpal bone osseous cyst-like lesion or degenerative medullary lucency with associated sclerosis. There is also left middle carpal joint and left carpometacarpal degenerative disease.
- Mild right talocrural degenerative joint disease.
- Moderate right talocalcaneal degenerative joint disease.

Report on 2021-04-12 21:48:33 UTC signed by:

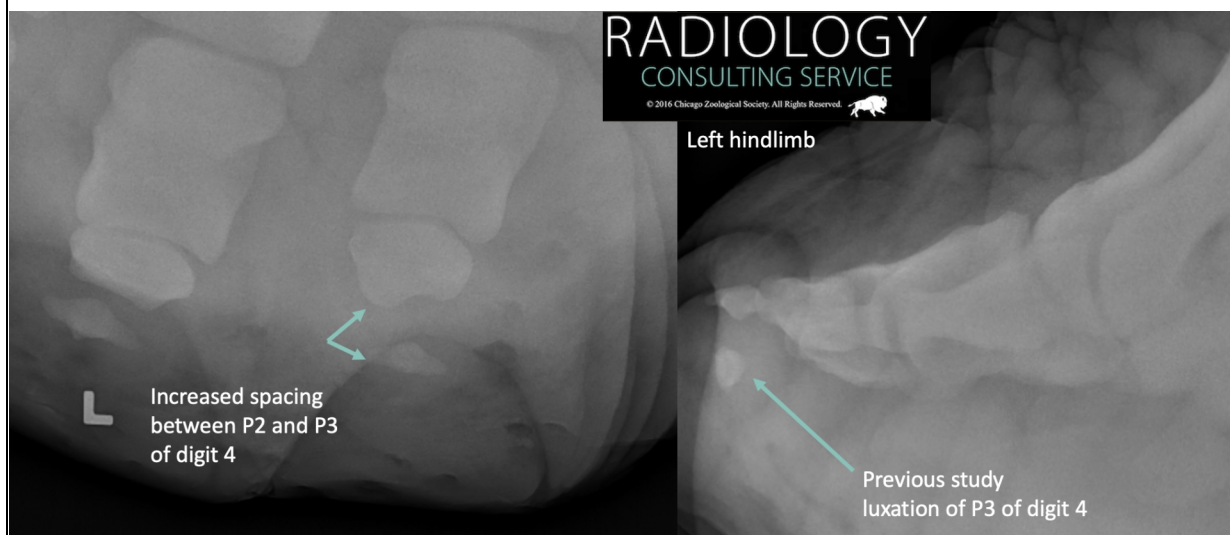
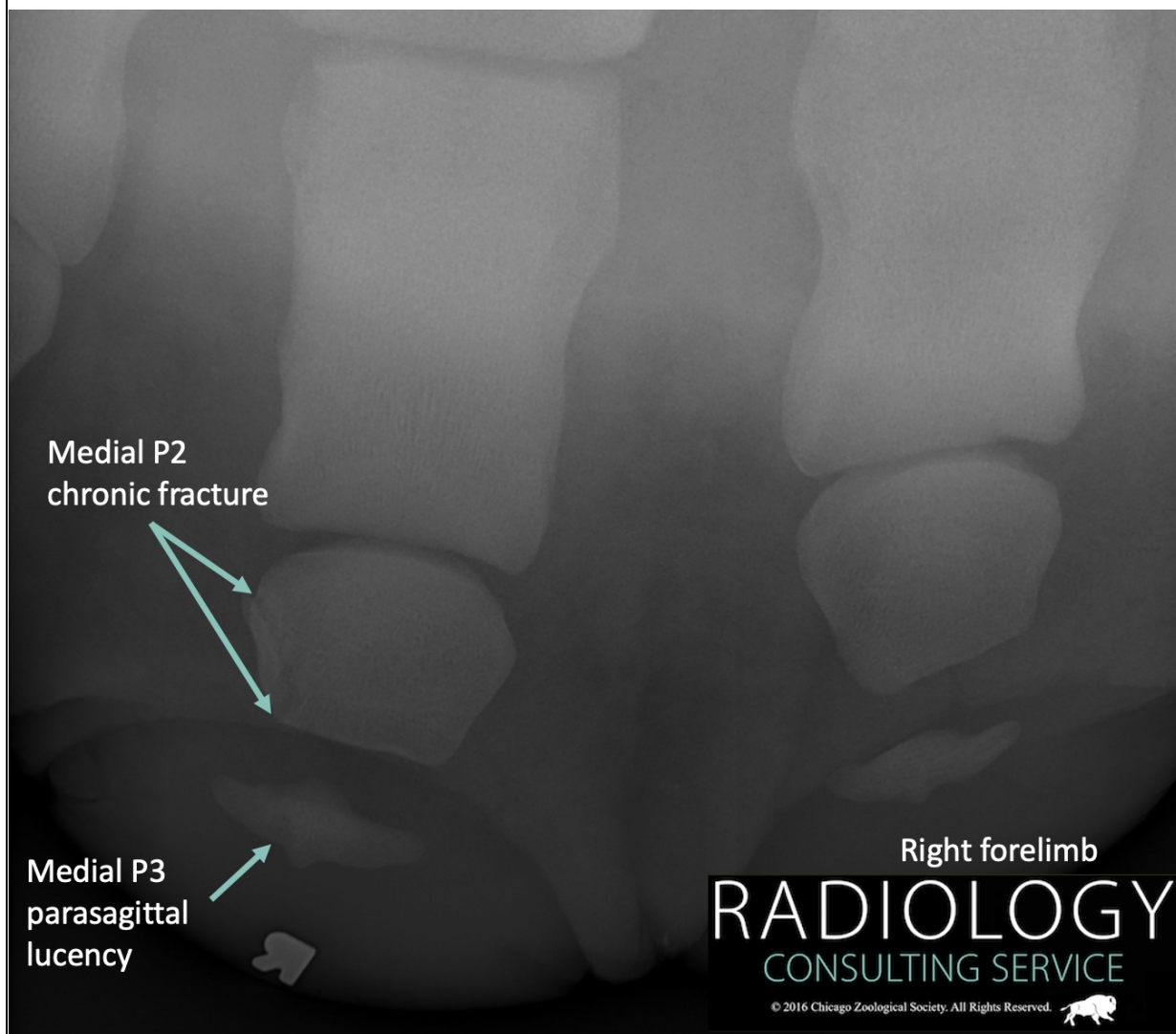
Eric T. Hostnik

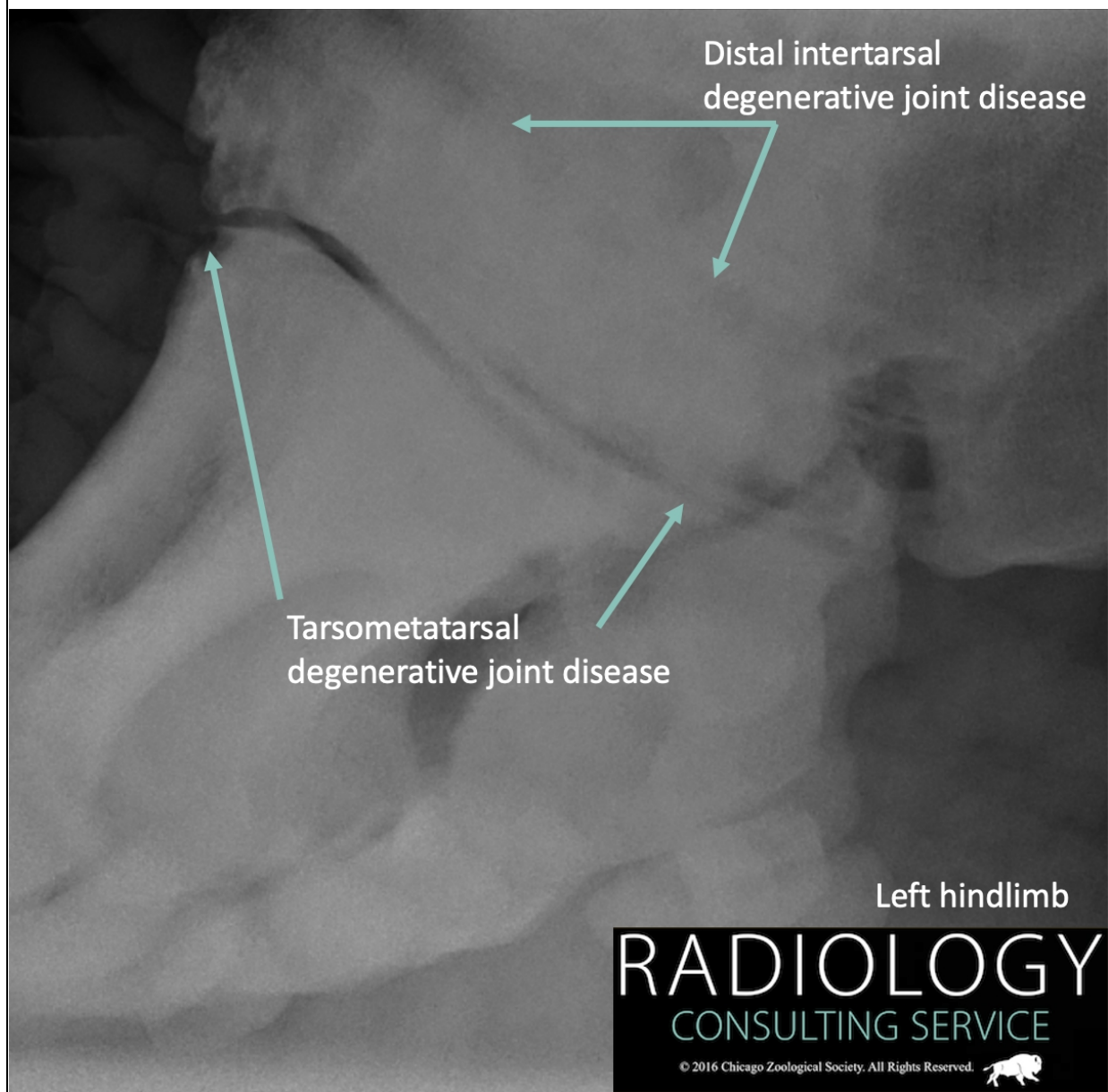
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708-688-8RCS

The findings, impressions, and recommendations listed are based on the history and clinical information provided. Interpretation should be performed by a licensed veterinarian serving as the primary clinician for the animal. Images in this report may not be reproduced without permission of the Brookfield Zoo/Chicago Zoological Society.

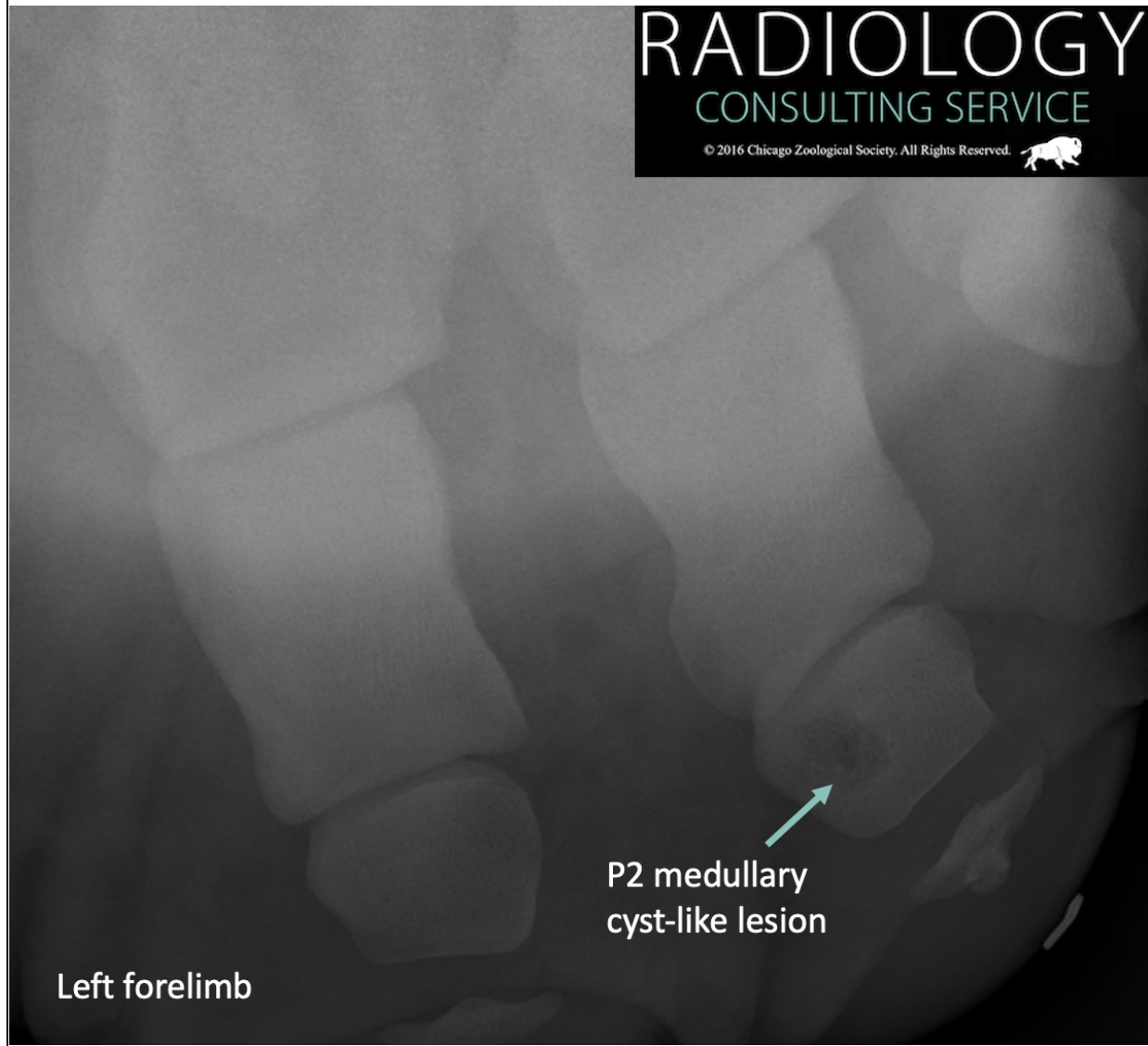




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Left forelimb

P2 medullary
cyst-like lesion

