

**Patient Information**

Patient:	████████████████████	Patient ID:	████	Report Number:	40440
Patient Birth Date:		Age:		Gender:	
Study Description:		Accession:		Study Date:	20210804
Species:		Breed:		Modalities:	DX
Sedation Used:	No	Anesthesia Used:	No	Submitted By:	██████████
Facility:	██████████	Submitted:	2021-09-21 15:04:00 UTC	Finalized:	2021-09-22 21:33:49 UTC

Annotated Images Requested: No

STAT Request: 0

Anatomical Region:

**History**

Acute lameness/toe touching of the right forelimb.  
 16-year-old female reticulated giraffe who presented initially with acute lameness/toe touching of the right forelimb. Initial radiographs showed an articular type ii fracture of the distal phalanx (in what appears to be the lateral claw). Lameness has responded with NSAID administration. Recheck radiographs of the right forefoot were taken today under behavioral restraint appear to show greater displacement of the fracture. A marker "La" was placed on the plate to indicate the lateral (right) claw in the images.

**Findings**

August 4, 2021: 18 radiographs are available for review. Images are compared to July 19, 2021.

The proximal phalanges of the third and fourth digits are normal. The proximal interphalangeal joints of the third and fourth digits are normal. There is asymmetric disease of the distal sesamoid bones (navicular bones) of the right forelimb; the fourth digit is more affected. There is persistent soft tissue thickening of the right forelimb lateral digit. The two round lucencies within the palmar aspect of a distal sesamoid bone are similar; there is sclerosis of bone surrounding the lucencies. The distal sesamoid bone of the third digit is normal. The fracture of the lateral aspect of the fourth digit distal phalanx is wider; the fracture extends to the lateral aspect of the distal interphalangeal joint. The bone surrounding the fracture of the distal phalanx of the fourth digit is sclerotic and the margins are mildly irregular. The solar margin of the fourth digit distal phalanx is mildly irregular, especially at the lateral quarter. There is heterogeneous, granular mineral superimposed on the distal phalanx and hoof of the affected digit. The third digit distal phalanx is mildly irregular along the solar margin; the lateral quarter is heterogeneous with ill-defined lucencies (this is the region of the fracture in the fourth digit). There are small osteophytes on the margins of the distal interphalangeal joints; the third digit is more affected. Granular mineral is superimposed on the other digit hoof wall. The distal portions of the left forelimb are unremarkable.

**Impressions**

1. There is progressive widening of the right forelimb fourth digit distal phalangeal lateral wing fracture with an articular component (Type II). There is associated pedal osteitis and likely resorption of the bone. Septic osteitis is not excluded.
2. There are static distal sesamoid bone (navicular bone) cysts within the fourth digit of the right forelimb; the cysts can be secondary to navicular degeneration, adhesions of the deep digital flexor tendons, and/or degenerative disease of the distal interphalangeal joint.
3. Right distal digital cellulitis/edema; less likely abscess.
4. There is mild osteitis of the right forelimb third digit distal phalanx; the most affected region is the lateral quarter (similar location to the fourth digit fracture).
5. Right forelimb distal interphalangeal degenerative joint disease of the third and fourth digits; the third digit is

- more affected.
- 6. Unremarkable proximal interphalangeal joints.
- 7. Superficial debris of the distal extremities.

## Recommendations

Report on 2021-09-22 21:33:49 UTC signed by:

**Eric T. Hostnik**

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