Question 2

Images A and B are scintigraphic images of an 8-year-old Arabian gelding used for endurance riding examined for acute severe fore limb lameness following a 120 km competition.

Describe the scintigraphic findings. Be specific

- focal
- intense
- increased radiopharmaceutical uptake
- proximal
- palmar aspect of the
- third metacarpal bone

State the two main differential diagnoses that would result in this appearance.

- Enthesiopathy suspensory origin/avulsion fracture (either, but do not accept suspensory desmitis)
- Palmar cortical stress fracture of the third metacarpal/cannon bone

Images C-F are magnetic resonance images of the same region.

Complete the table below to identify the sequence used to acquire each of the Images.

<table>
<thead>
<tr>
<th>Image(s) acquired using this sequence (C-F)</th>
</tr>
</thead>
<tbody>
<tr>
<td>T1-weighted GRE</td>
</tr>
<tr>
<td>T2* weighted GRE</td>
</tr>
<tr>
<td>STIR FSE</td>
</tr>
</tbody>
</table>

Describe the imaging abnormality that is most obvious in Images D and E.

- Hypointense line/intermediate signal proximal palmar metacarpus

What is the explanation for this finding?

- Phase cancellation/fat-water artefact

What is the diagnosis based on Images C-F?

- Fluid accumulation/bone bruising/bone oedema
- Proximal palmar metacarpus
Question 10

Rank the following suture materials on resorption time, from shortest to longest, and state whether the material is mono- or multifilament.

<table>
<thead>
<tr>
<th>Suture material</th>
<th>Resorption time (rank)</th>
<th>Monofilament or multifilament</th>
</tr>
</thead>
<tbody>
<tr>
<td>Polyglactin 910</td>
<td>1</td>
<td>multifilament</td>
</tr>
<tr>
<td>Polydioxanone</td>
<td>3</td>
<td>monofilament</td>
</tr>
<tr>
<td>Glycomer 631</td>
<td>2</td>
<td>monofilament</td>
</tr>
</tbody>
</table>

Question 15

On which limb(s) does the horse in Video A show lameness?

RH
RF
LF

Describe the clinically significant radiographic features of the tenogram shown in Image B.

Absence of normal silhouette of the manica flexoria

When combining a local anaesthetic agent with the contrast medium used to obtain Image B, which injection site results in the greatest chance of inadvertent desensitisation of the distal limb?

Proximal recess/proximal approach

Image C is a transverse ultrasound image acquired with the limb in a non-weightbearing position. In relation to the regional bony landmarks, at what level was it acquired? Be specific.

Proximal to PSBs but still at level of tendon sheath
Accept anything that makes this location clear (e.g. proximal pouch of fetlock)

Identify the structures labelled (i), (ii), (iii) and (iv).

(i) Superficial digital flexor tendon
(ii) Deep digital flexor tendon
(iii) Wall of the tendon sheath/synovial lining of tendon sheath
(iv) Torn/damaged manica flexoria/retracted fibres of torn manica flexoria
Question 22

The CT images shown were obtained from a 19-year-old gelding that presented with right-sided purulent nasal discharge of 2 months duration.

What is the most likely diagnosis for the abnormality labelled (vi)?

*Paranasal sinus cyst/sinus cyst*