



PATIENT

Chief Richardson

SPECIES

Canine

BREED

German Shepherd

SEX

Neutered Male

AGE

10 Years 8 Months

WEIGHT

65 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Danielle Kitz

HOSPITAL NAME

Woodlands AH

REFERRING VET

Dr. Danielle Kitz

PRESENTING CLINICAL SIGNS

acute onset swelling of medial aspect of left front leg 8/10/22 - extending from the medial aspect of the elbow to the carpus which developed while the owner was gone for the afternoon he was hobbling around and very painful at onset - Grade III lameness It is almost 30 days later and he is still limping on the leg, albeit not as severely with rest, NSAIDs, and pain management. We added a course of cephalexin and it did not make any difference to the swelling or the lameness. The swelling is firm but not hard, not freely moveable, doesn't in and of itself seem very painful when touched.

Abnormal PE/Chem/CBC/UA Results: Chief has never been febrile and all remaining PE findings are unremarkable. The xray report and some photos are attached as additional documents below Also used ultrasound to guide a needle aspirate of the hypoechoic regions of the swelling. A large quantity of light-colored, clear, non-blood tinged fluid was obtained. Sediment was prepared for cytology and really this was a proteinaceous material without any true cellularity noted other than maybe an occasional WBC.

ULTRASONOGRAPHIC EXAMINATION OF THE FORELIMB

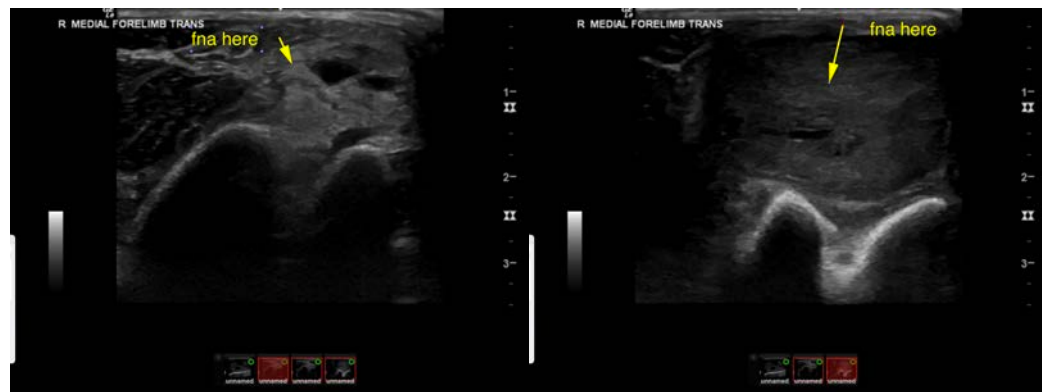
The forelimb revealed a cystic lesion within the muscle belly. Periosteum appeared to be intact. No evidence of bony lysis. The mass appears to be deriving from the joint with an attached expansive cystic component.

ULTRASONOGRAPHIC FINDINGS

- Cystic and parenchymal mass, appears to be deriving from the joint space

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of bony lysis or invasion. Expansive and disorganized. Suspect chondrosarcoma or similar neoplasia. Ultrasounds guided FNA of the regions indicated would be warranted. Chest radiographs warranted. Chronic fibrosing lesion from prior insult possible. However, connective tissue-based mass is a strong potential. Minimal inflammatory patterns noted. Drainage of the cystic portions could be considered from a palliative standpoint. However, FNA of the regions indicated are strongly recommended.



INVOICE

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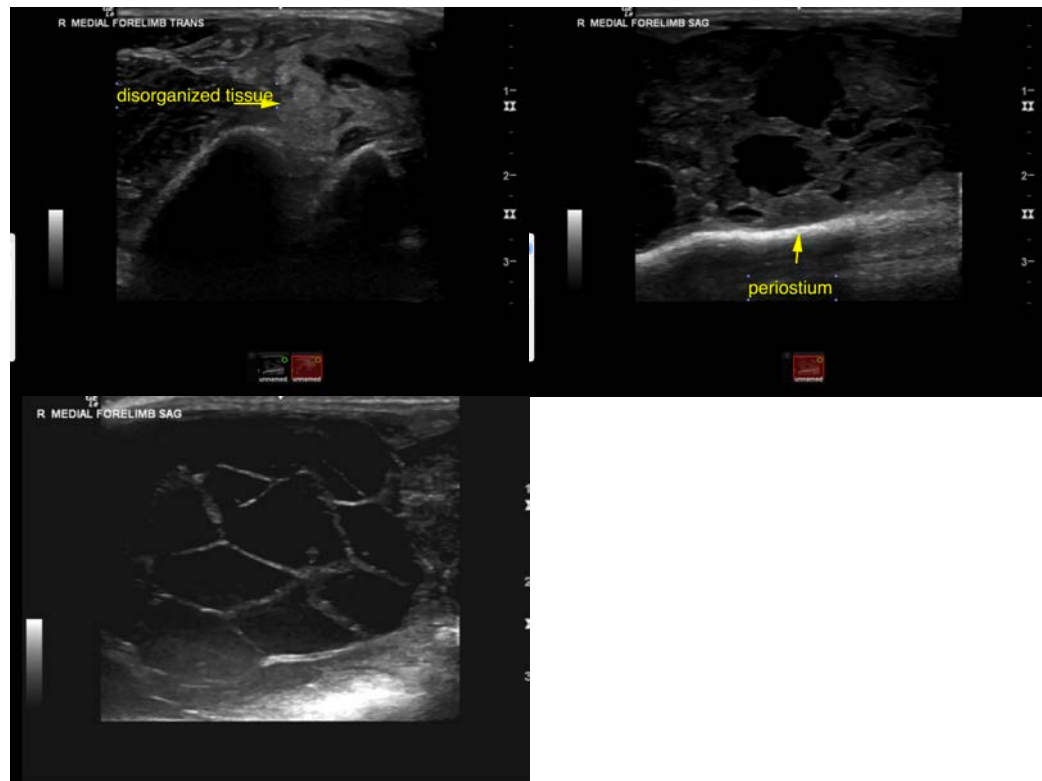
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

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