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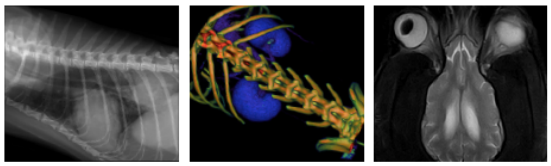

PATIENT

Oscar Hayes

SPECIES

Canine

BREED

Labrador Retriever

SEX

Neutered Male

AGE

11 Years

INTERPRETED BY

Heike Rudorf, DVM, Dr. med. Vet., DipECVDI DVR

HOSPITAL NAME

Healing Paws

REFERRING VET

Dr. Jennifer Levitsky

INVOICE

26904

DATE

11/5/21

PRESENTING CLINICAL SIGNS

Started limping on LF after swimming around 10/26/21. Has been on rimadyl since then and very slight improvement. Has seen chiropractor and no real improvement. 3/4 lame LF. Stands with elbow abducted a bit and off weights leg. Painful on flexion of elbow and decreased ROM with flexion. Unable to bear weight on LF leg if lifting RF leg without additional support. Swimming will aggravate lameness.

RADIOGRAPHIC STUDY OF L FORELEG (SHOULDER TO CARPUS)

1x L lateral scapula to distal antebrachium, 1x lateral thorax and L scapula to proximal antebrachium, 1x L scapula to mid antebrachium, 1x L shoulder to carpus, 1 orthogonal view scapula to mid-antebrachium

RADIOGRAPHIC FINDINGS

A mild soft tissue swelling is located on the dorsal aspect of the distal radius and is accompanied by ill defined, faint layers of periosteal reaction. Permeative lysis affects the distal 4cm of the radial diaphysis and involve the cranial cortex. There is a step in the dorsal outline of the radial cortex combined with a thin, oblique, lucent line, level with the periosteal reaction.

Smooth bone spurs are present on the carpal and metacarpal bones.

The shoulder joint is congruent with even subchondral bone surfaces.
A small amount of new bone appears to be located on the tip of the anconeal process.

RADIOGRAPHIC DIAGNOSIS

- Monostotic, destructive bone lesion
- Linear cortical disruption

Incidental findings

- Carpal OA
- Elbow OA, very mild

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes are compatible with a primary bone tumor of the distal radius. The cortical step most likely represents a pathological fracture. Further tests can be carried out if treatment is considered. These include identifying the tumor type by means of biopsy and examination of the thorax, ideally with CT. An oncologist and a surgeon should be involved in the treatment planning.

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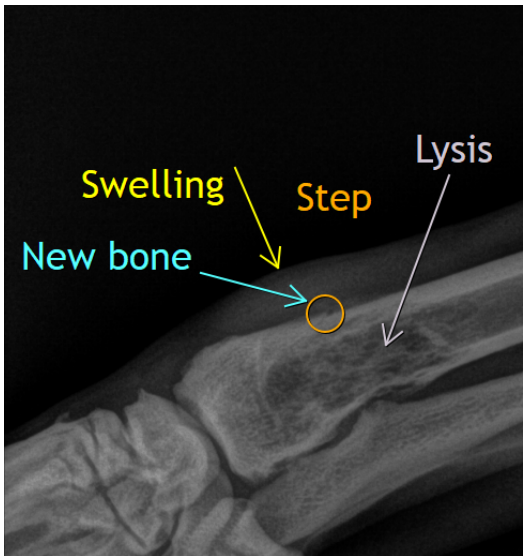

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Heike Rudorf, DVM, Dr. med. vet., DipECVDI, DVR
dr.h.rudorf@gmail.com