



## PATIENT

Stewie Olsen

## SPECIES

Canine

## BREED

Labrador Retriever Mix

## SEX

Neutered Male

## AGE

5 Years 9 Months

## WEIGHT

41.2

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Emily

## HOSPITAL NAME

Faith AC

## REFERRING VET

Dr. Faith

## INVOICE

36545

## DATE

4/10/26

## PRESENTING CLINICAL SIGNS

History: Recent surgery to remove a mass on 3/23/26, location of the mass was on his left shoulder, time of surgery its mass has been on Stewie for more than 6 months. Sent out to MSU for pathology, came back basal cell carcinoma. A new mass now on the left side of rib cage, noticed around 4/5/26. He has been slower to eat recently also and diarrhea today (4/10/26)

## RADIOGRAPHIC STUDY OF THORAX AND ABDOMEN

The body condition score is 4-5/9. An approx. 8cm long, soft tissue mass is located lateral to rib 9 where the costo-chondral junction is missing and a triangular region of new bone is present along the lateral aspect of the rib; distal to this the bone is more amorphous and less well organized. Amorphous calcification is located on the medial aspect. The soft tissue mass appears to displace the caudal left lung lobe, which is rounded, and the fundus.

### Thorax and Cranial Abdomen

The cranial mediastinum is of physiological size and opacity. The terminal trachea diverges from the thoracic vertebrae, and the carina is located level with T5.

One small, round soft tissue opacity (STO) is located dorsal to the first visible sternum and another one in the intercostal space of ribs 7 and 8 on the right. A larger, oval STO is located just ventral to the trachea.

The cardiac silhouette occupies 70% of the chest height and 2 intercostal spaces. Chamber or outflow tract enlargement is not obvious.

The abdominal organs are surrounded by very little fat; diaphragm and abdominal wall are intact.

The liver is located within the costal arch.

The spleen is not clearly outlined.

The fundus contains air. Distribution and size of the visible small intestinal loops appear physiological.

Both renal shadows have a physiological size and shape. A roundish, calcified structure is superimposed onto the caudal kidney but not included in the FOV on the VD.

## RADIOGRAPHIC DIAGNOSIS

- Rib tumor
- Pulmonary metastases

Incidental findings

- Spondylosis
- Possible renal calcification

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The rib mass could represent a chondro-sarcoma. Pulmonary metastases are present. Ultrasound is recommended to check, if the mass is indeed displacing abdominal organs.



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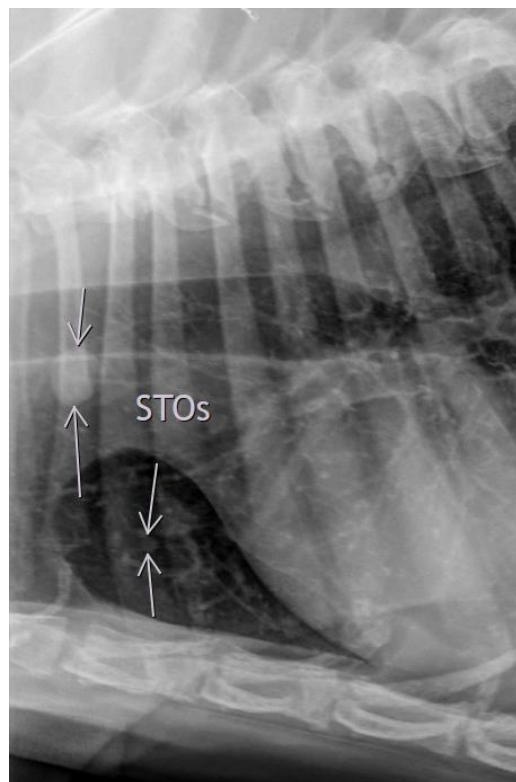
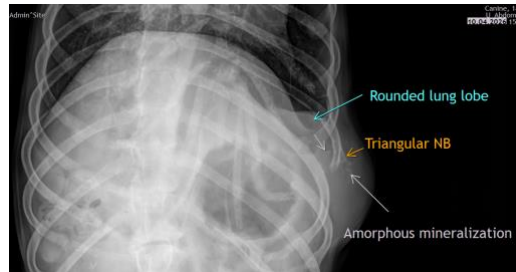
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**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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.

**Heike Rudorf**, DVM, Dr. med. vet., DipECVDI, DVR  
[info@sonopath.com](mailto:info@sonopath.com)