



PATIENT

Urie Howes

PRESENTING CLINICAL SIGNS

swollen left carpal joint
Abnormal PE/Chem/CBC/UA Results: unremarkable

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE LEFT & RIGHT CARPUS

Mediolateral and dorsopalmar views of both carpal joints totaling 3 images available for review.

BREED

German Shepherd
Mix

RADIOGRAPHIC FINDINGS

Left Carpus

Regional soft tissue swelling circumferential to the distal left radius is seen. There is permeative aggressive osteolysis of the distal left radial metaphysis blending into the epiphysis and diaphysis with a long and indistinct transition zone. Multifocal cortical bone thinning and endosteal scalloping are seen. There is a large amount of spiculated and laminar periarticular new bone. The changes do not cross the joint and do not involve the ulnar. Mild smooth new bone formation is seen in the distal aspect of the accessory carpal bone.

SEX

Male Neutered

Small mineral opaque foci are present superimposed onto the soft tissue distal of the ulnar carpal bone.

AGE

10 Years

Right Carpus

Moderate enthesophytosis is noted in the palmar and distal aspect of the accessory carpal bone. There are small osteophytes on the dorsal contour of the radiocarpal bone.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

A soft tissue nodule is superimposed onto the soft tissues caudal of the distal ulnar.

RADIOGRAPHIC DIAGNOSIS

- Monostotic aggressive osteolytic lesion of the distal left radius.
- Mild right carpal osteoarthritis and accessory carpal bone enthesophytosis.

HOSPITAL NAME

St. Catherine's Animal
Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings are compatible with primary neoplasia of bone in the distal left radius such as osteosarcoma and less likely chondrosarcoma, hemangiosarcoma, fibrosarcoma, or other. The changes are not typical for bacterial osteomyelitis. Fungal osteomyelitis can theoretically never be ruled out entirely, however, would depend on the patient having been to an endemic area and is by far less likely than primary neoplasia of bone. Further verification by means of bone biopsy could be considered as well as staging.

REFERRING VET

Dr. Boctor

INVOICE

48136

DATE

11-1-21



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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.

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