



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Lynk Bell Reason for Visit: Possible Blood hematoma on chest / losing weigh History: Lynk may have gotten bitten by a yellow jacket bee, first noticed last Sunday morning., by yesterday the wound has swollen a lot, and it drained last night. He seems to be swollen on his leg a little, mom is concerned, he also has been losing weigh gradually, although he has an appetite. X- Rays Sent Out , Pitting Edema on Radius, and open wound on Cranial (R) shoulder

SPECIES Canine Abnormal PE/Chem/CBC/UA Results: Hydration: Appropriately hydrated Mentation: BAR EENT: No nasal discharge; clear no discharge OU; clean no debris AU; No cough on tracheal palpation. Oral Cavity: No dental tartar present Lymph Nodes: Symmetrical, no changes in size, shape, consistency Skin: Good hair coat, no signs of ectoparasites. No lesions noted.

BREED Pitbull X CV/Respiratory: No murmur or crackles/wheezing auscultated. Synchronous pulses, normal rate. Normal bronchovesicular sounds. Abd/GI: Soft non painful abdomen, no organomegaly, no abnormalities on abdominal palpation Uro/Perineum: N Musculoskeletal: Ambulatory x4, no lameness noted. No pain on palpation of limbs. BCS 5/9 Neurological: Appropriate Diagnostic Testing Needed: -Adult annual plus w/ UA -Radiographs of right front leg Declined

SEX Diagnostics/Treatments: N/A Assessment: -Pitting edema -Abscess

NM

RADIOGRAPHIC STUDY OF THE RIGHT FRONT LIMB

AGE

Mediolateral view of the right front limb from the shoulder to the carpal joint available for review.

11 Years, 3 Months

RADIOGRAPHIC FINDINGS

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Soft tissue swelling with irregular outline of the skin surface and heterogeneous opacity is seen circumferential to the right humerus. There is permeative osteolysis of the proximal diaphysis and metaphysis of the right humerus with sunburst and laminar periosteal new bone formation, cortical bone thinning, and a long and indistinct transition zone to the unaffected bone in the proximal epiphysis and distal diaphysis of the right humerus.

HOSPITAL NAME

DPC Veterinary
Hospital

Moderate osteoarthritic changes of the right shoulder, right elbow, and right carpal joint are seen.

RADIOGRAPHIC DIAGNOSIS

REFERRING VET

Dr. Orcut

- Monostotic aggressive osteolytic lesion of the right proximal humerus with soft tissue swelling and wound.
- Right shoulder, right elbow, and right carpal osteoarthritis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

55013

The radiographic study reveals presence of a monostotic aggressive osteolytic lesion within the right proximal humerus. The findings are compatible with primary neoplasia of bone such as osteosarcoma. Chondrosarcoma or other secondary neoplasia including metastatic disease as well as fungal osteomyelitis cannot be ruled out entirely as differential diagnoses even though they are considered less likely and by far less common. Final diagnosis would require sampling in terms of bone biopsy which would be an option for further definition along with full staging in case the owners are potentially interested in pursuing tumor treatment.

DATE

11-5-22



PATIENT

Lynk Bell

SPECIES

Canine

BREED

Pitbull X

SEX

NM

AGE

11 Years, 3 Months

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

DPC Veterinary
Hospital

REFERRING VET

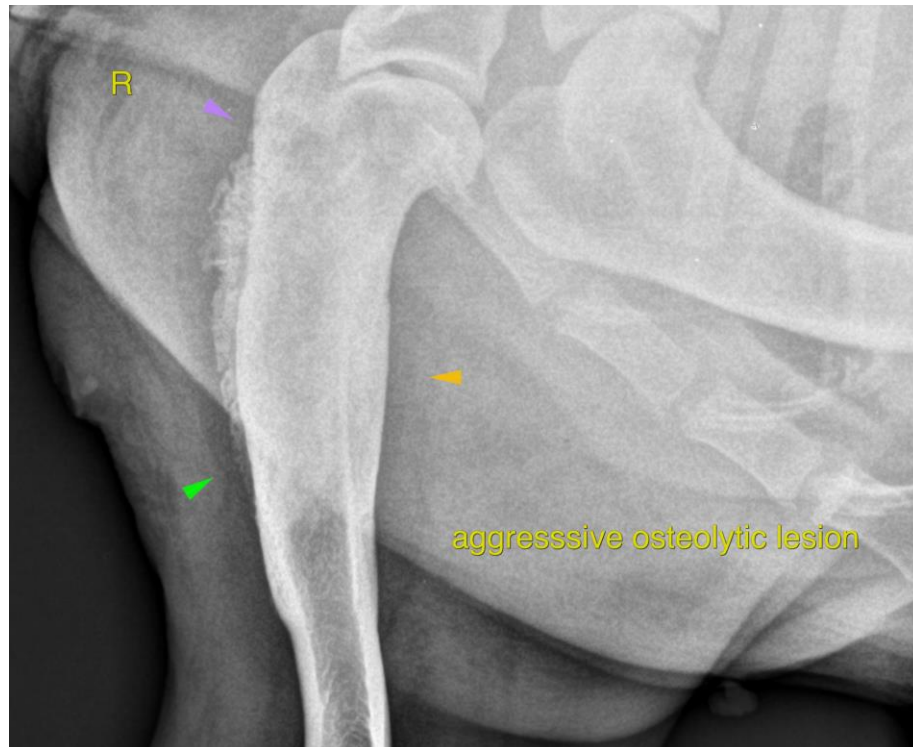
Dr. Orcut

INVOICE

55013

DATE

11-5-22



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.

Nele Eley, DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
Nele.Eley@sonopath.com