

**PATIENT**

Winston Hurley Heart  
Rescue

**PRESENTING CLINICAL SIGNS**

p presented for sedated rads of the left forelimb due to progressive lameness back on 11/14/21 - called owner, discussed about the radiographic findings. told owner concern about bone cancer, rec bone biopsy or amputoin owner wanted to do bone biopsy first so we did and results were inconclusive so we rexrayed including chest rads today in anticipation of amputation next week per owners request.

**SPECIES**

Canine

**RADIOGRAPHIC STUDY OF THE LEFT FRONT LIMB & THORAX**

Multiple mediolateral and orthogonal views of the left front limb and right/left lateral and ventrodorsal intubated and non-intubated views of the thorax totaling 14 images available for review.

**BREED**

English Bulldog

**RADIOGRAPHIC FINDINGS****Thorax**

Multiple wedge shaped hemivertebrae are seen in the mid and caudal thoracic spine along with spondyloses and kissing spines as well as mildly increased kyphosis angle.

**SEX**

MN

The degree of pulmonary inflation is fair. A diffuse increase in interstitial opacity is noted which at least in part can be explained by the poor pulmonary inflation. No evidence of pulmonary nodules or masses is seen.

**AGE**

5 Years

There is no evidence of abnormal mediastinal widening other than fat deposits.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

The cardiac silhouette is relatively round in appearance; however, no significant enlargement and no specific chamber abnormality is noted. There is no evidence of a vascular pattern.

Course and width of the trachea are considered within breed related normal limits.

Moderate gastric aerophagia is noted.

**HOSPITAL NAME**

Animal Surgical  
Center

**Left Front Limb**

A monostotic aggressive osteolytic lesion of the distal left scapula is seen with a large amount of spiculated new bone in the cranial margin of the scapular neck. The transition zone to the unaffected bone is long and indistinct. The lesion appears to be expansile with multifocal cortical bone defects and endosteal scalloping. More amorphous and laminar periosteal new bone is noted in the caudal margin of the distal left scapula. Concurrent soft tissue mass effect is present. The changes do not cross the joint and spare the humerus.

**REFERRING VET**

Dr. T Infernuso

The radiographic presentation of the left elbow reveals blunted contour of the medial coronoid process with subtrochlear notch sclerosis of the ulnar.

**INVOICE**

48876

**RADIOGRAPHIC DIAGNOSIS**

- Monostotic aggressive osteolytic lesion of the distal left scapula.
- No evidence of pulmonary metastatic disease.
- Medial coronoid disease of the left elbow without significant osteoarthritic changes - unlikely to be of clinical significance.

**DATE**

12-2-21



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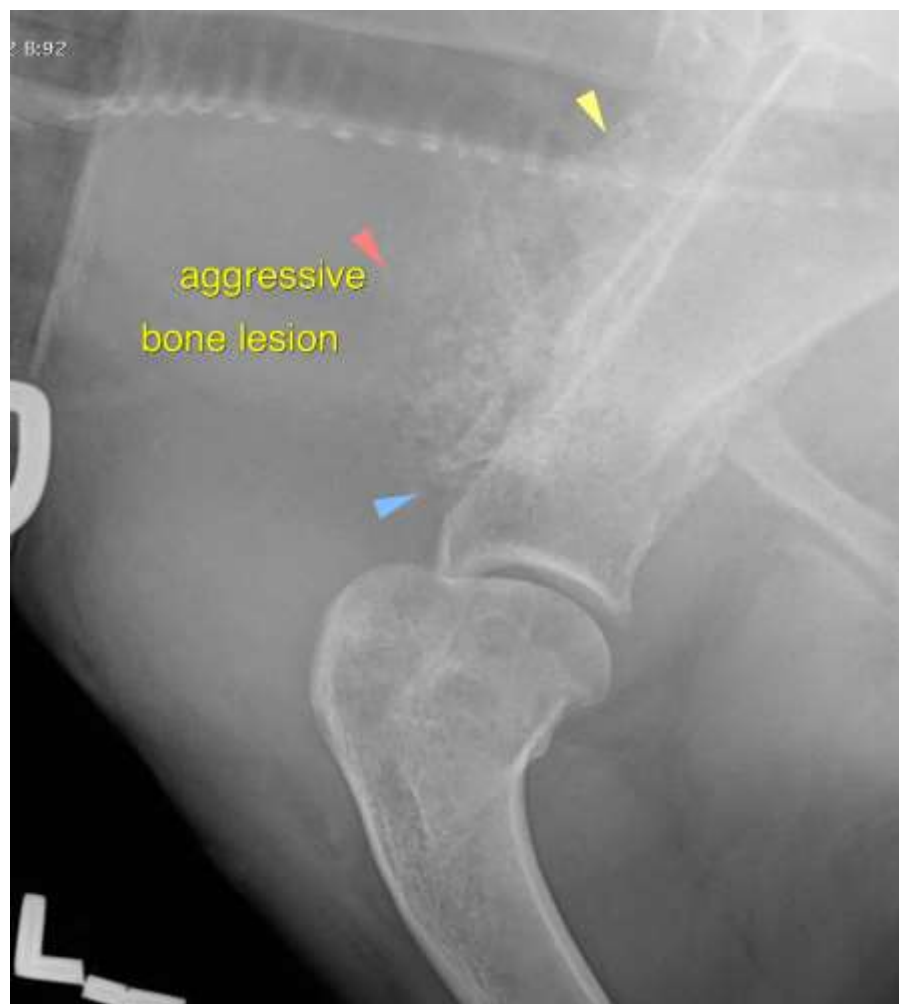
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The main finding is the presence of a monostotic aggressive osteolytic lesion of the distal left scapula. Primary neoplasia of bone such as chondrosarcoma or osteosarcoma is considered most likely. Other neoplasia cannot be ruled out entirely. Final diagnosis would require repetition of the histology; however, the radiographic presentation of the lesion meets all malignancy criteria.

The relatively poor degree of pulmonary inflation puts limits on the assessment of the pulmonary parenchyma; however, as far as assessable, there is no evidence of pulmonary or mediastinal metastatic disease at this point.





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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.

**SPECIES**

Canine

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