

PATIENT

Tango Arredondo

SPECIES

Canine

BREED

Rottweiler

SEX

Male Neutered

AGE

9Y

WEIGHT

44.8kg

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

IMAGING PERFORMED BY

Emily Johnson

HOSPITAL NAME

Bluegrass Veterinary
Specialists

REFERRING VET

Jessica Rutledge

INVOICE

73748

DATE

2-16-26

PRESENTING CLINICAL SIGNS

- P started eating food quickly and V+ it back up approximately 3 weeks okay
- firm non movable mass on L ribcage noticed approx 2 weeks ago
- mass was seen in the thoracic cavity on x-rays at RDVM

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX

Plain and post contrast studies in soft tissue, bone, and lung windows are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

The CT study reveals a large osteolytic and osteoproliferative lesion emerging from the costochondral junction of the left 9th rib measuring approximately 12 x 7 x 6 cm. The mass extends extra- and intra-thoracically forming a heterogeneous soft tissue mass contiguous with the rib. Cortical destruction and irregular periosteal reaction are present. Heterogeneous contrast enhancement is noted throughout the soft tissue component of the mass with the exception of the intrathoracic portion. Mild regional pleural thickening with an extra-pleural sign of the mass is noted. There is no evidence of penetration of the mass into the abdominal cavity.

No pulmonary nodules or masses are identified. Mild plate like atelectasis is seen in the cranial contour of the left caudal lung lobe.

No mediastinal lymphadenopathy is present.

Thoracic vasculature and heart appear normal.

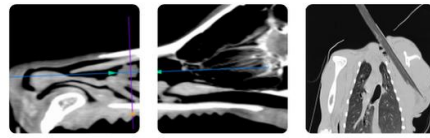
Mild distal esophageal wall thickening without abnormal dilation is noted.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Aggressive mass of the left 9th rib with osteolysis osteoproliferation and both extra- and intra-thoracic soft tissue extension.
- Mild regional pleural thickening with extra-pleural sign.
- No pleural effusion.
- No evidence of pulmonary metastasis or mediastinal lymphadenopathy.
- Suspect esophagitis.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals an aggressive mass of the left 9th rib with extra- and intra-thoracic extension. The imaging features are most consistent with mesenchymal neoplasia of the rib such as osteosarcoma, chondrosarcoma, or hemangiosarcoma. No evidence of pulmonary or mediastinal metastatic disease is evident. The intrathoracic component of the mass may represent part of the neoplasia or organizing hematoma. Evidence of pleural fluid is not seen at the time of the examination. Surgical consultation for rib resection and thoracic wall reconstruction can be considered. Histopathologic confirmation via biopsy to guide therapy should be sought. Oncologic evaluation can be considered for possible adjunct chemotherapy based on histopathology.



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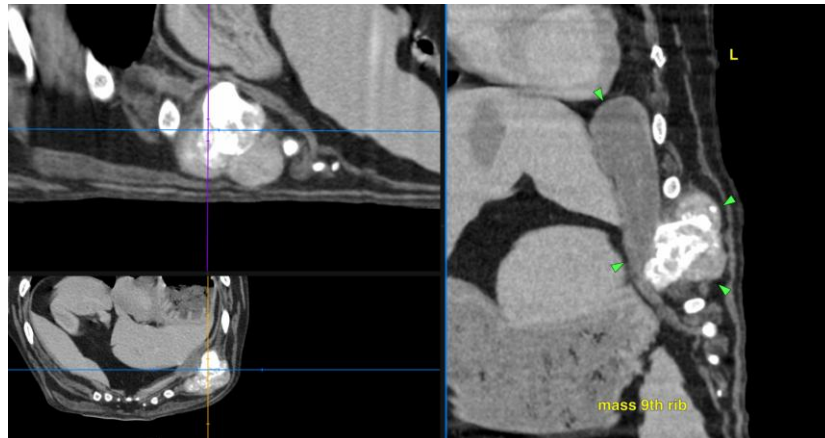
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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