



PATIENT

Libby Richardson

PRESENTING CLINICAL SIGNS

*PREVIOUS CASE SENT CONT OF CASE Improved with medications(ciprofloxacin and Rimadyl) but now is back to doing poorly. Found her on the compost pile just laid out. Will not eat and is hot and drooling again. Would like a chest xray to see if things have changed.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Mucous Membranes PALE Pink, DROOLING, CRT <2 seconds, FEELS HOT. Hydration DEHYDRATED BASED ON skin turgor. Abdomen Soft, nonpainful, no masses, no organomegaly. Rectal examination not performed. Cardiovascular/Respiratory No murmur or arrhythmia. Lungs auscult normally. Eupnic. Eye, Ears, Nose, Throat INJECTED SCLERA AND GREEN DISCHARGE FROM BOTH EYES. Genitourinary No discharge or irritation. No anal gland enlargement. Lymph Nodes No enlargement. Musculoskeletal LEFT CAUDAL RIB CAGE MASS STILL THERE. Ambulatory X 4, normal gait. Neck, spine, and tail are normal. Limb palpation is normal. No loss of proprioception. Neurologic DEPRESSED. Oral PTYALISM, HOT. Skin / Coat MASS OVER LEFT CAUDAL RIBS AS NOTED.

BREED

Colorado Mountain Dog (livestock guardian)

RADIOGRAPHIC STUDY OF THE THORAX

SEX

Female

2 consecutive studies with right lateral and orthogonal views respectively dated 2/15/22 and 2/25/22 totaling 10 images available for review.

The orthogonal view of the study dated 2/25 is right/left flipped.

AGE

1 Year, 4 Months

RADIOGRAPHIC FINDINGS

There is an irregular shaped well delineated soft tissue opaque mass in the left caudal and ventral hemithorax which appears to be associated with the costochondral junction of the left 8th rib. An extrapleural sign is seen as well as mainly intrathoracic extension with mass effect. Mild concavity of the lateral thoracic wall is noted in the left caudal ribcage. A large amount of spiculated and sunburst type new bone is emerging from the costochondral junction of the 8th left rib. No evidence of pulmonary changes is seen.

Radiographic findings are stationary except for mild volume increase of the mass compared with the prior study.

No radiographic evidence of cardiovascular pathology is seen.

The course of the trachea presents within normal limits.

There appears to be no pleural effusion.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

RADIOGRAPHIC DIAGNOSIS

- Extrapleural intrathoracic mass emerging from the costochondral junction of the left 8th rib with severe intrathoracic extension and mass effect.

HOSPITAL NAME

Elizabeth Animal Hospital

REFERRING VET

Leon Anderson, DVM

INVOICE

50577

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic studies suggest presence of a large extrapleural soft tissue mass emerging from the costochondral junction of the 8th left rib with intrathoracic extension and mass effect.

DATE

2-25-22

Differential diagnosis includes chondrosarcoma, osteosarcoma, and less likely chondroma or osteoma. Other soft tissue sarcoma such as hemangiosarcoma and fibrosarcoma cannot be ruled



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out but is less likely. Based on the radiographic presentation, aggressive behavior is considered likely. Final diagnosis would require sampling for histology which could be obtained blind or with ultrasonographic guidance. At this time, there is no evidence of pulmonary metastatic disease, and no mediastinal lymph node enlargement is seen. There appears to be no pleural effusion.

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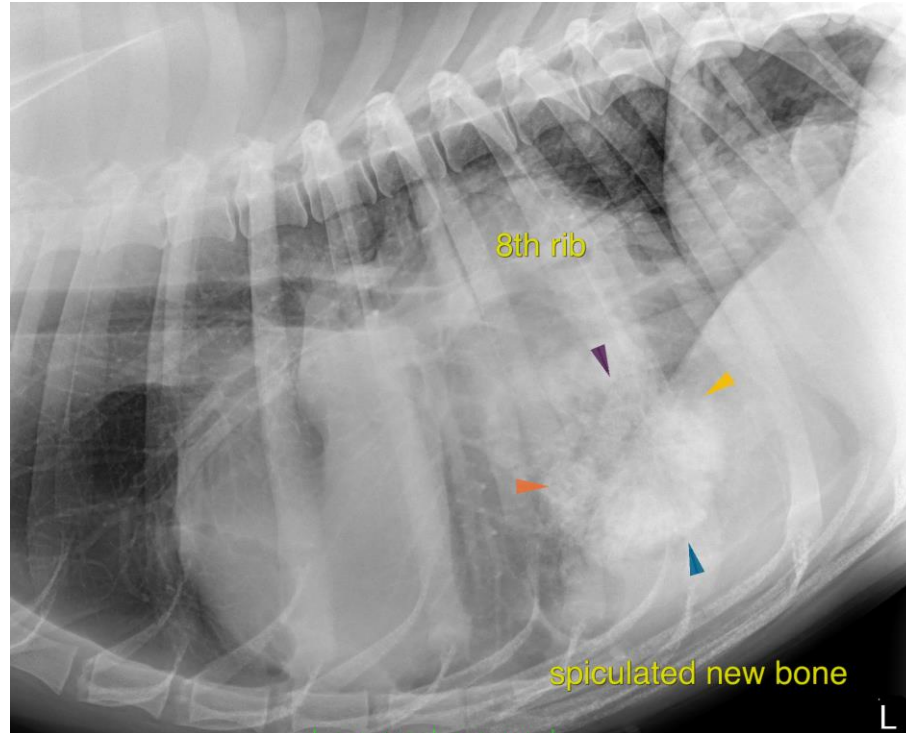
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REFERRING VET

Leon Anderson, DVM



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.

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