



PATIENT

Shira Zamora

SPECIES

Canine

BREED

Cane Corso

SEX

Intact Female

AGE

4Y, 9M

WEIGHT

140.0lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Brooke

HOSPITAL NAME

DPC Veterinary
Hospital

REFERRING VET

Dr. Rivera

INVOICE

74295

DATE

3-23-26

PRESENTING CLINICAL SIGNS

- P is presented for limping from the right front leg for about 12 days

Abnormal PE/Chem/CBC/UA Results: Musculoskeletal: BCS = 7.5-8/9. Ambulatory x 3. RF: grade 5/5 lameness/non-weight bearing. - Ortho exam performed under sedation (reacted on elbow palpation), no obvious soft tissue swelling or external wounds. 1) CBC: LYM 1.04 (1.05-5.10), MONO 1.15 (0.16-1.12) 2) CHEM: AST 58 (0-50) Assessment: RF lameness: r/o OSA vs. osteomyelitis vs. other Overweight

RADIOGRAPHIC STUDY OF THE RIGHT SHOULDER & RIGHT ELBOW

Mediolateral and craniocaudal views of the right shoulder and right elbow totaling 3 images available for review.

RADIOGRAPHIC FINDINGS

Monostotic permeative aggressive osteolytic lesion involving the right proximal humeral metaphysis and epiphysis is seen characterized by cortical bone destruction, permeative lysis of the medullary bone, and amorphous periosteal new bone formation with long and indistinct transition zone to the unaffected bone in the humeral diaphysis is seen. Joint space is preserved. No evidence of shoulder arthropathy is seen.

The right elbow presents mild osteophyte formation along the anconeus process. Joint alignment and bone contours are otherwise normal. No evidence of medial coronoid pathology or osteochondritis is seen.

RADIOGRAPHIC DIAGNOSIS

- Right proximal humeral monostotic aggressive osteolytic lesion suspicious for primary bone tumor such as osteosarcoma.
- Mild right elbow osteophytes consistent with early degenerative changes.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The aggressive appearance of the proximal humeral lesion strongly suggests a primary bone neoplasia with osteosarcoma being the most likely differential given the patient's age and breed. Less likely differential diagnoses include osteomyelitis, metastatic disease, and other primary bone tumors. Biopsy of the proximal humeral lesion for histopathologic confirmation can be performed as well as surgical planning if osteosarcoma is confirmed. Staging workup including thoracic radiographs or CT and abdominal imaging to rule out metastatic disease is recommended as well.



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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.

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