



**PATIENT**

Bronco Steiner

**PRESENTING CLINICAL SIGNS**

He likes to jump into Scott's truck and go back and forth from the front and back seats and wondering if he twisted his leg. Thursday he seemed sore in the left front leg and by Saturday he was really limping and was swollen. Michelle did a compression wrap to try and help the swelling and it didnt help the swelling and he was still limping good.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: PE: Healthy but the left front leg was warm to the touch and had a hard time flexing the Capris. NO RECENT LABS

**BREED**

Saint Bernard

**RADIOGRAPHIC STUDY OF THE LEFT DISTAL FOREARM**

Mediolateral and craniocaudal views of the left forearm totaling 2 images available for review.

**RADIOGRAPHIC FINDINGS**

**SEX**

Neutered

A monostotic aggressive osteolytic lesion with permeative lysis in the distal left radius is seen extending from the distal diaphyseal third into the distal metaphysis and epiphysis. The transition zone to the unaffected bone is long and indistinct. A large amount of amorphous periosteal new bone is seen as well as peripheral soft tissue swelling. The aggressive lytic lesions spare the ulna and do not cross the antebrachio carpal joint.

**AGE**

7 Years, 8 Months

At this time, there is no evidence of pathologic fracture.

Minimal osteophytes of the left intercarpal joint is seen.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**RADIOGRAPHIC DIAGNOSIS**

- Monostotic aggressive osteolytic lesion of the left distal radius.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The radiographic study reveals a monostotic aggressive osteolytic lesion of the left distal radius. The findings are highly suggestive for primary neoplasia of bone such as osteosarcoma. Other primary neoplasia of bone and secondary neoplasia of bone including metastatic disease and fungal osteomyelitis are theoretical but by far less likely differential diagnoses. Final diagnosis requires sampling such as bone biopsy. Bone biopsy and complete staging could be considered should this patient be a suitable candidate for palliative treatment and should the owner support this.

**HOSPITAL NAME**

Elizabeth Animal  
Hospital

**REFERRING VET**

Leon Anderson, DVM

**INVOICE**

57087

**DATE**

3-6-23



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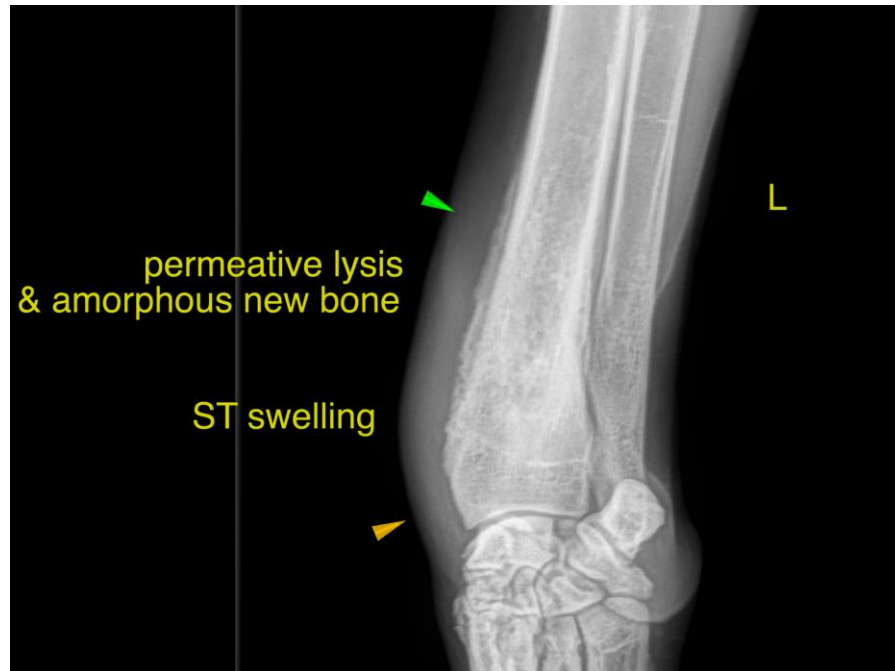
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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