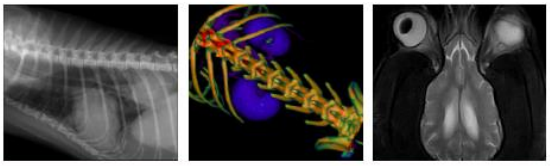
SonoPath Teleradiology

EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Captain Brannon

SPECIES

Canine

BREED

American Bulldog Mix

SEX

Male Neutered

AGE

7.3 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Boca Park Animal Hospital

REFERRING VET

Tifanie Silver

INVOICE

51842

DATE

4-30-22

PRESENTING CLINICAL SIGNS

Left hindlimb lameness previously occurred when P was 6 years old. O's do not remember his diagnosis at that time, but a CCL tear was not noted, and they noted that his lameness was due to a congenital issue (no records provided). P has previously been diagnosed with atopy.
Abnormal PE/Chem/CBC/UA Results: - Toe touching lameness of the left hindlimb - Cranial drawer sign is negative - No apparent pain on palpation of the left hindlimb, though P has decreased range of motion on extension

RADIOGRAPHIC STUDY OF THE STIFLES

Mediolateral and craniocaudal views of both stifles totaling 3 images available for review.

RADIOGRAPHIC FINDINGS

Left Stifle

Severe atrophy of the left hind limb musculature is seen. There is generalized atrophy of the bone in the left hind limb.

Severe articular swelling of the left stifle joint is present. Cranial thrust of the tibia is present and there is a large amount of periarticular osteophytes; however, the main finding is presence of extensive aggressive moth eaten osteolysis in the distal left femur with long and indistinct transition zones to the unaffected bone and spiculated periosteal new bone formation. The patella, proximal tibia, as well as the fibula appear to be spared.

Right Stifle

The right stifle joint presents moderate articular swelling with severe cranial thrust of the tibia and a large amount of periarticular osteophytes.

RADIOGRAPHIC DIAGNOSIS

- Monostotic aggressive osteolytic lesion of the distal left femur.
- Severe disuse atrophy and bone atrophy within the left hind limb.
- Bilateral stifle osteoarthritis with radiographic evidence of cranial cruciate ligament failure.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study reveals a monostotic aggressive osteolytic lesion in the distal left femur. Primary neoplasia of bone such as osteosarcoma and chondrosarcoma is a potential differential diagnosis as well as metastatic disease of another primary tumor. The possibility of fungal osteomyelitis cannot be ruled out entirely should the patient have been to an endemic area, however, is thought by far less likely than osseous neoplasia.

Final diagnosis could be established by means of bone biopsy, and this should especially be taken into consideration along with full staging including three-view thoracic radiographs and abdominal ultrasound, should the owners be interested in pursuing palliative tumor treatment including limb amputation.

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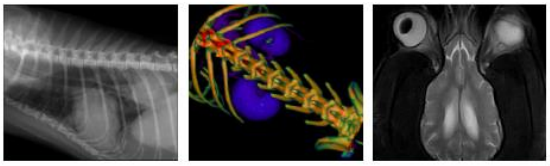

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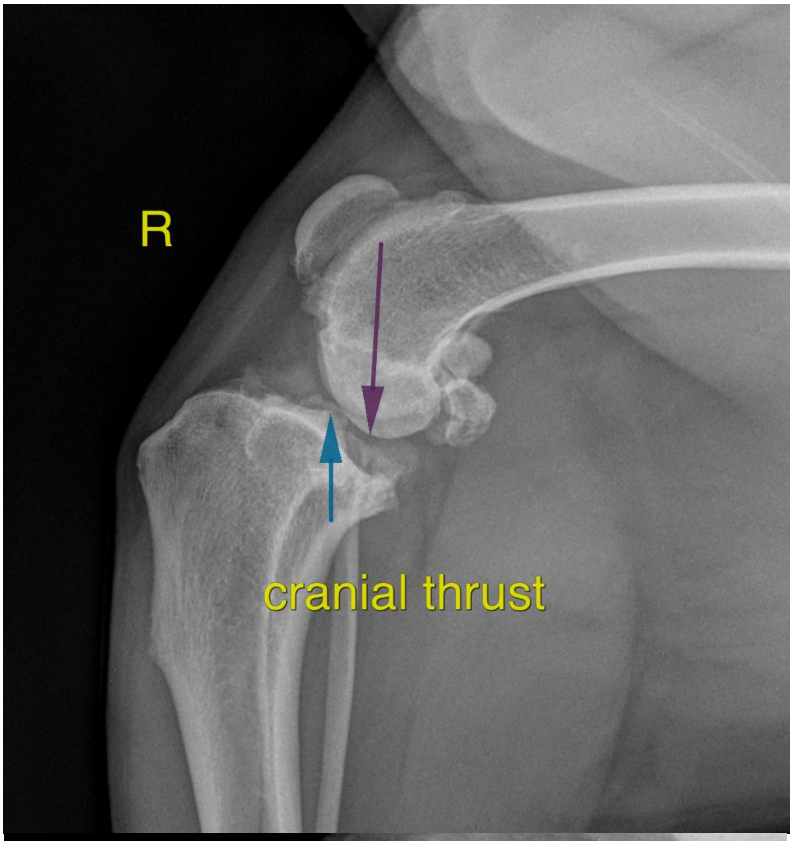

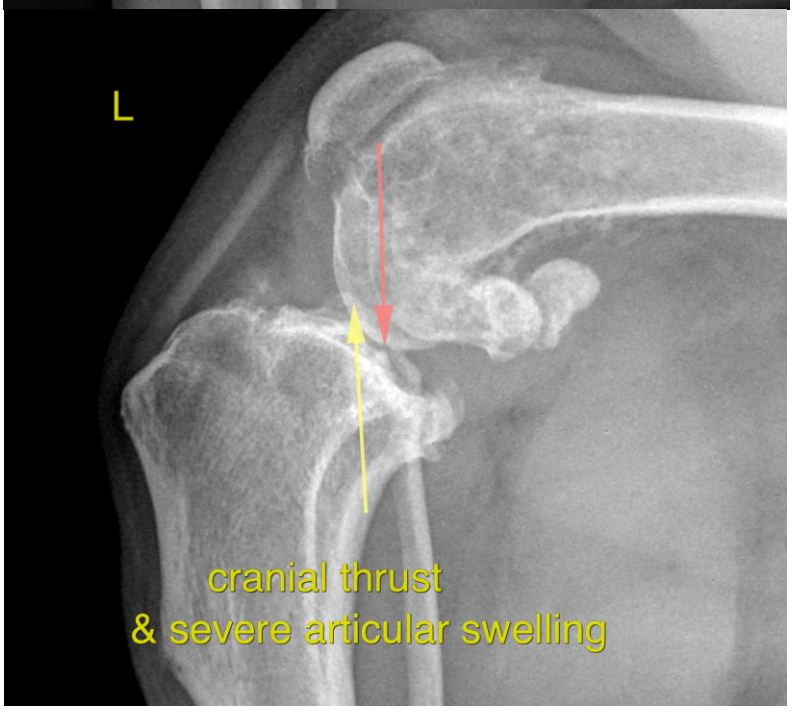

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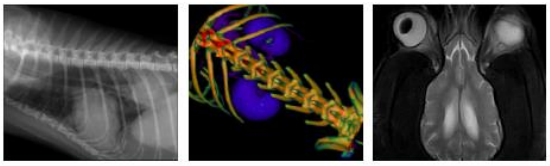

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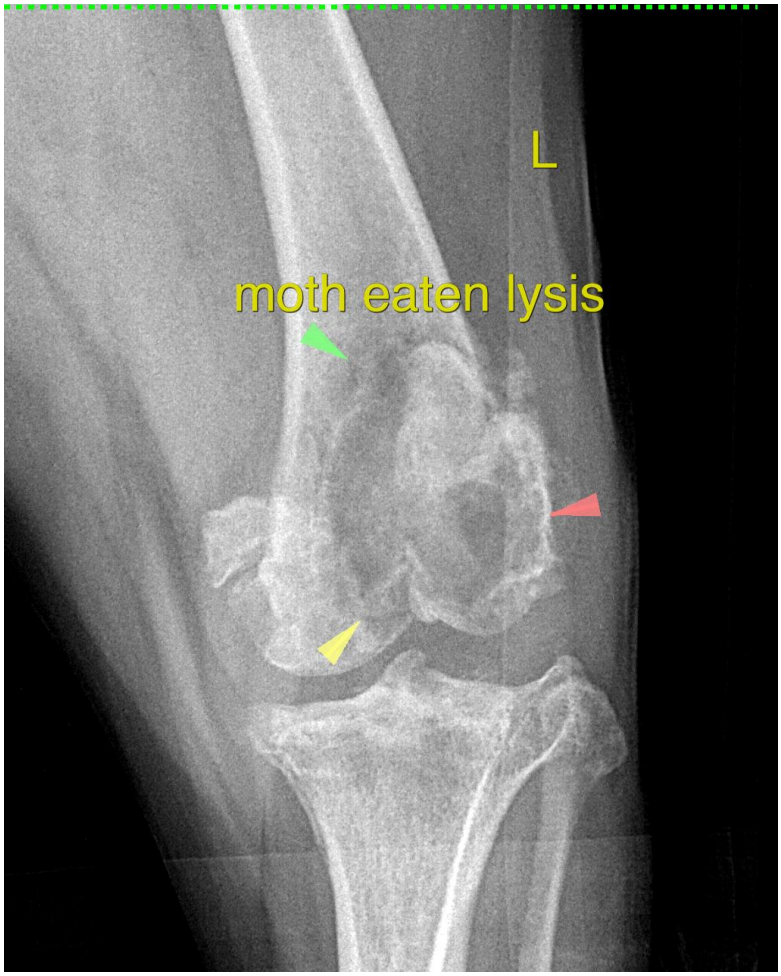

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley, DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
Nele.Eley@sonopath.com