



PATIENT PRESENTING CLINICAL SIGNS

Riley Michlik Intermittent right front lameness - does better on novox but reoccurs after. On Gaba 600mg and Traz 200mg for procedure.
Abnormal PE/Chem/CBC/UA Results: K+ 6.0, MCHC 29.8

SPECIES COMPUTED TOMOGRAPHIC STUDY OF THE THORACIC LIMBS

Canine Shoulders to the carpi - Plain studies available for review.

BREED COMPUTED TOMOGRAPHIC FINDINGS

Greater Swiss Mt. Dog
Shoulders

An aggressive osteolytic lesion is seen in the proximal right humerus. The lesion presents permeative lysis of the medullary cavity. Multiple cortical bone defects are seen and there is moderate amorphous periosteal new bone formation. The transition zone of the lesion is long and indistinct and extends from the proximal epiphysis into the mid diaphyseal third of the right humerus.

SEX
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Reduced muscle volume of the right thoracic limb is noted.

AGE
5 Years
The right axillary lymph node presents mild symmetric enlargement.

Mild periarticular osteophytes of the right and left shoulder joint are seen.

INTERPRETED BY Elbows

Nele Eley, DVM
Dr. med. Vet. DipECVDI
Minimal degenerative joint disease of the bilateral elbows is noted.

There is no evidence of medial coronoid pathology, subchondral bone defects, or significant joint incongruity.

HOSPITAL NAME Carpi

Animal Hospital of
Sussex County
The carpal bones are intact and in situ. No evidence of articular swelling or osteoarthritis is seen.

The cervical spine presents within normal limits.

REFERRING VET COMPUTED TOMOGRAPHIC DIAGNOSIS

- Dr. Ackernecht
- Monostotic aggressive osteolytic lesion of the right proximal humerus.
 - Mild disuse atrophy of the right thoracic limb musculature.
 - Mild right axillary lymphadenomegaly.
 - Normal age related left shoulder, elbows, and bilateral carpi.

INVOICE INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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DATE
6-13-23
The CT study reveals a monostotic aggressive osteolytic lesion of the right proximal humerus. Primary neoplasia of bone such as osteosarcoma is a main differential diagnosis. Secondary neoplasia of bone including metastatic disease and osteomyelitis can never be ruled out entirely



PATIENT

Riley Michlik

as a differential diagnosis even though being considered by far less likely. Bone biopsy can be performed for a final histologic diagnosis. Consider complete screening including fine needle aspiration of the right axillary lymph node, three-view chest radiographs, and abdominal ultrasound in case the owner wants to pursue further treatment along with the biopsy.

SPECIES

Canine

The mild enlargement of the right axillary lymph node suggests reactive hyperplasia rather than metastatic disease even though this cannot be ruled out entirely.

BREED

Greater Swiss Mt.
Dog

SEX

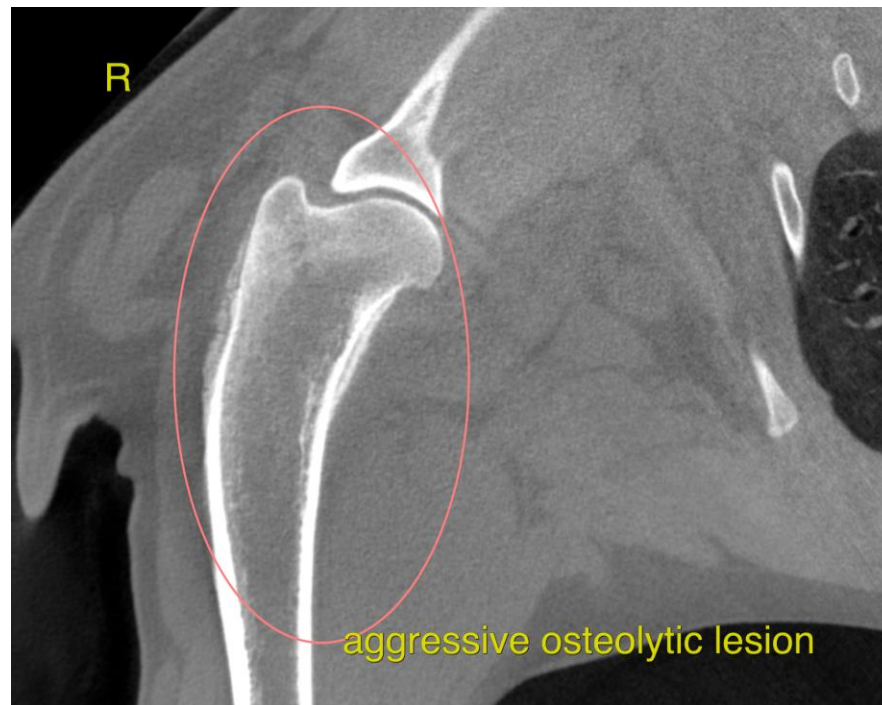
FS

AGE

5 Years

INTERPRETED BY

Nele Eley, DVM
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HOSPITAL NAME

Animal Hospital of
Sussex County

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.

REFERRING VET

Dr. Ackernecht

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INVOICE

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