



PATIENT PRESENTING CLINICAL SIGNS

Bear Woodling Patient began limping on left front limb 5 days ago. Eating/drinking/urinating/defecating normally. Patient is an indoor-only cat, no known incidences of related trauma. Has not been to a veterinarian since patient was a kitten.

SPECIES Abnormal PE/Chem/CBC/UA Results: Bloodwork elevations: MCV 53.2 fL, RDW 35.9 %, PLT * 615 K/ μ L, PCT * 0.98 %, otherwise normal. Firm thickening mid-shaft of humerus, no sample was able to be collected via aspiration. Rest of PE wnl.

Feline

RADIOGRAPHIC STUDY OF THE LEFT ELBOW & THORAX

BREED Lateral and ventrodorsal views of the thorax and mediolateral views of the left elbow totaling 4 images available for review.

DSH

RADIOGRAPHIC FINDINGS

SEX Left Elbow

MN A long spiraling fracture of the left humeral mid diaphysis is seen with mild contraction and caudoproximal displacement. There is extensive circumferential soft tissue swelling. The fracture margins are ill-defined. Moth eaten osteolysis with a long transition zone into the proximal and distal diaphysis is seen. There are small, isolated bone splinters in the fracture area as well as multifocal cortical bone thinning and periosteal new bone formation.

AGE 11 Years

Thorax

Mild mid-thoracic spondyloses are seen.

A mild generalized bronchial lung pattern is noted. An interstitial pulmonary nodule of approximately 8mm diameter is seen in the right caudal lung lobe. See image below.

No radiographic evidence of cardiovascular pathology is seen.

There is no mediastinal widening.

Course and width of the trachea are considered within normal limits.

RADIOGRAPHIC DIAGNOSIS

- Monostotic aggressive osteolytic lesion of the left humerus with pathologic fracture.
- Single interstitial pulmonary nodule.
- Bronchial lung pattern.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study confirms a pathologic fracture with monostotic aggressive osteolysis within the left humerus. Differential diagnosis includes primary neoplasia of bone such as an osteosarcoma and by far less likely fungal or other osteomyelitis.

Presence of an interstitial nodule is highly suggestive for metastatic disease.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

POCONO PEAK
VETERINARY
CENTER

REFERRING VET

Dr. Christine Coyle

INVOICE

53149

DATE

7-27-22



PATIENT

Bear Woodling

Granulomatous lung disease and pneumonic and fibrotic nodule are thought by far less likely, and this should be considered compatible with metastasizing osseous neoplasia until proven otherwise.

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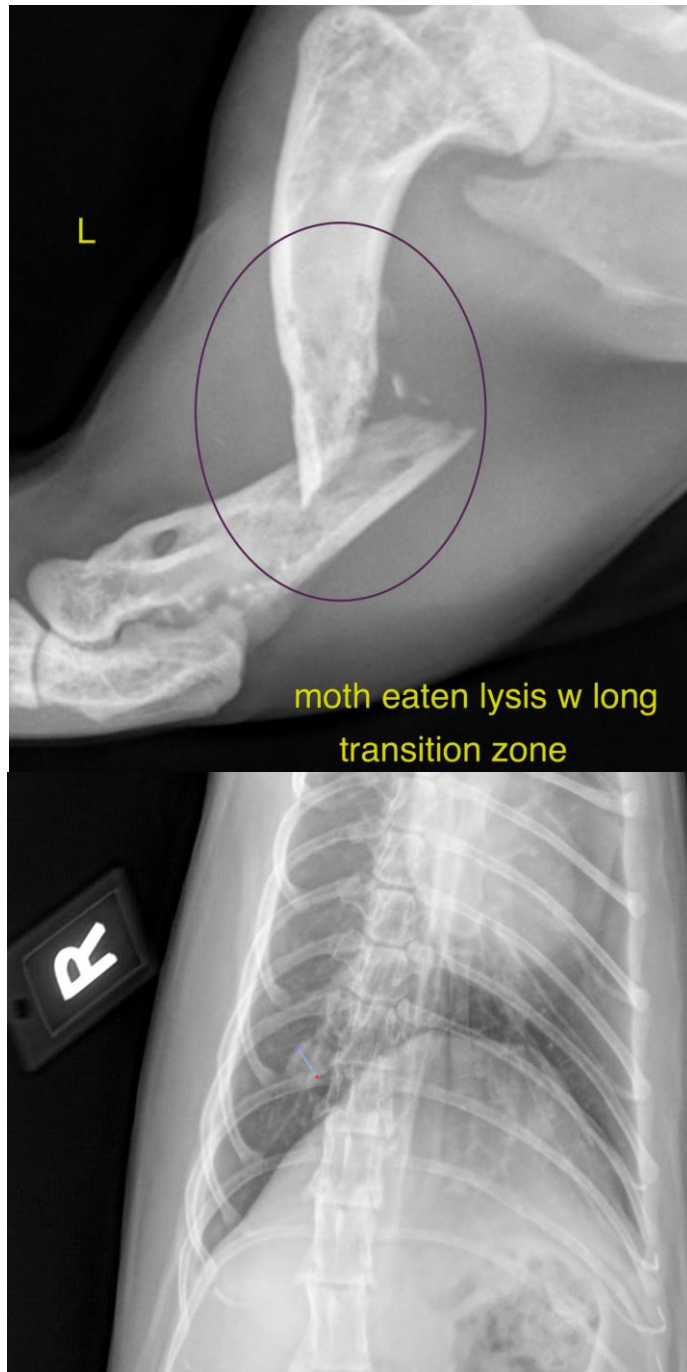
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Feline

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.

BREED

DSH

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