



**PATIENT**

Emme Cortese

**PRESENTING CLINICAL SIGNS**

RT FORELIMB LAMENESS WITH PAIN ASSOCIATED WITH RIGHT PROXIMAL HUMERUS. LOOKING FOR METASTATIC DISEASE.

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC STUDY OF THE THORAX**

Pre/post contrast studies provided for review.

**BREED**

Mixed

**COMPUTED TOMOGRAPHIC FINDINGS**

The right middle lobe shows a round, soft tissue dense and clearly defined nodule of approximately 2.50 cm in the perihilar region. The lungs apart from that are regularly ventilated with close contact to the inner thoracic wall on all sides. No evidence of pleural thickening, fluid accumulation or free pleural gas is noted.

**SEX**

FS

Pulmonary density is within normal limits. The mediastinum is regular in width and density. Mediastinal (sternal, tracheal-, bronchial) lymph nodes are considered to be normal. Thoracic trachea and esophagus present as expected. The heart is inconspicuous as far as can be assessed with CT.

**AGE**

12 Years

The diaphragm is normal.

**INTERPRETED BY**

Sebastian Jawinski,  
German Board  
Certified Vet  
Specialist in  
Diagnostic Imaging

The right proximal humerus shows an osteolytic lesion with loss of medullary bone density and irregularities/destruction of cortical bone margins. There are mild, ill-defined and irregular periosteal reactions noted. The transition zone to normal bone is poorly defined.

The displayed thoracic and lumbar spine, sternum and ribs present severe degenerative changes. There is no evidence of bony lysis noted.

**HOSPITAL NAME**

Animal Surgical  
Center

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Suspicion of a malignant bone neoplasia right proximal humerus
- Pulmonary nodule 2.50 cm right perihilar middle lobe
- Severe degenerative changes of the displayed spine, ribs and sternum

**REFERRING VET**

Hampton Vet  
Hospital

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

CT findings of the right humerus are highly suspicious for a malignant and primary bone neoplasia as commonly seen with osteosarcoma in loco typico. The osteolytic pattern, the periosteal irregularities and the ill-defined transition to normal bone speak for an aggressive and malignant bone lesion which would go along with that assumption. Differentials include but are not limited to other aggressive bone lesions caused by metastases or severe osteomyelitis. With regard to that finding the pulmonary nodule likely represents a metastasis. Pulmonary granuloma, cyst, hematoma and abscess formation are further differentials. Final assessment is a matter of biopsy/FNA and the temporal evolution.

**INVOICE**

49333

**DATE**

1-5-22



**PATIENT**

Emme Cortese

**SPECIES**

Canine

**BREED**

Mixed

**SEX**

FS

**AGE**

12 Years

**INTERPRETED BY**

Sebastian Jawinski,  
German Board  
Certified Vet  
Specialist in  
Diagnostic Imaging

**HOSPITAL NAME**

Animal Surgical  
Center

**REFERRING VET**

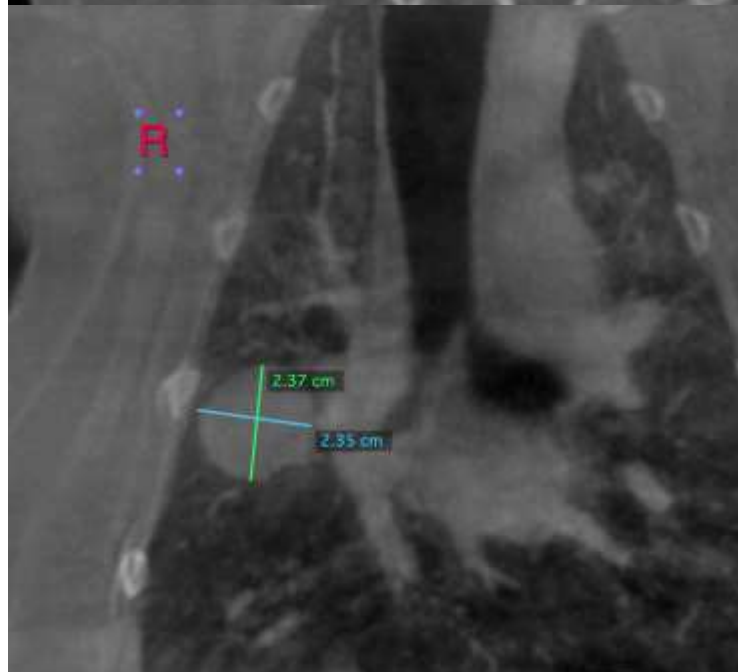
Hampton Vet  
Hospital

**INVOICE**

49333

**DATE**

1-5-22





**PATIENT**

Emme Cortese

**SPECIES**

Canine

**BREED**

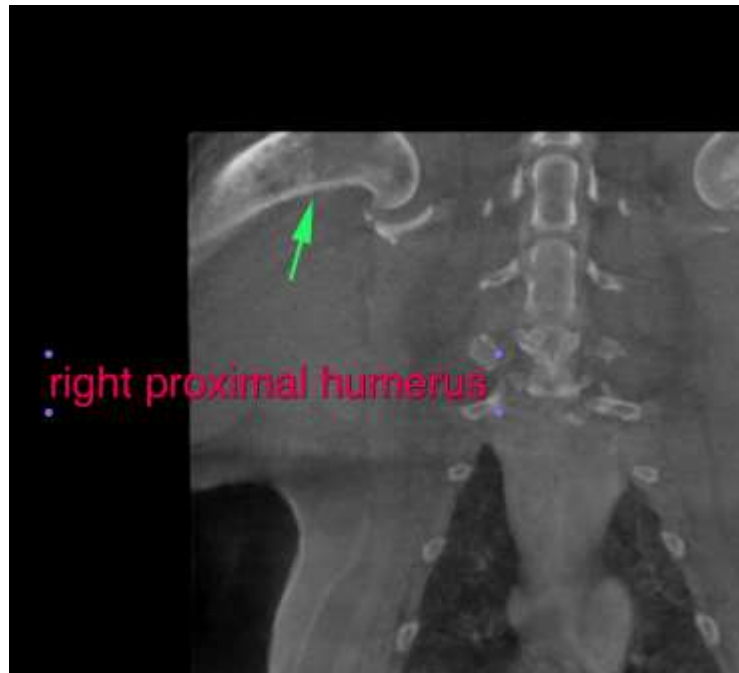
Mixed

**SEX**

FS

**AGE**

12 Years



**INTERPRETED BY**

Sebastian Jawinski,  
German Board  
Certified Vet  
Specialist in  
Diagnostic Imaging

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.

**HOSPITAL NAME**

Animal Surgical  
Center

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.

**Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging**  
Sebastian.Jawinski@sonopath.com

**REFERRING VET**

Hampton Vet  
Hospital

**INVOICE**

49333

**DATE**

1-5-22