



**PATIENT**

Caesar Dennison

**PRESENTING CLINICAL SIGNS**

Caesar presented for right front leg limb lameness. Owner states that pet began to limp about 1 month ago, was treated as arthritis at first but pet did not improve. Owner then brought pet back to RDVM for Xrays and RDVM informed Owner based on Xrays it is very possible that pet has cancer.

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY OF THE THORAX**

A high resolution pre- and post-contrast CT study of the skull and abdomen and a post-contrast CT study of the thorax are provided for review.

**BREED**

Rottweiler

**COMPUTED TOMOGRAPHIC FINDINGS**

Multifocal mild spondylosis formation is seen along the thoracic spine.

**SEX**

Male Neutered

The right proximal humerus presents an ill-defined zone with permeative osteolytic lesions with endosteal scalloping and amorphous periosteal new bone formation. The proximal right humerus is surrounded by a large, ill-defined soft tissue component. The right axillary lymph nodes bilaterally are prominent.

**AGE**

6 Years

The lung parenchyma is hypoinflated and multiple regions with compression atelectasis of the lung parenchyma are present.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

Moderate mineralization of the wall of the aortic arch is noted.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

**HOSPITAL NAME**

Animal Surgical  
Center

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**REFERRING VET**

LI Spay and Neuter

- Monostotic aggressive osteolytic lesion right proximal humerus with large associated soft tissue component
- Lymphadenopathy axillary lymph nodes
- Generalized hypoinflation of the lung with dystelectasis of the lung parenchyma, no evidence of pulmonary metastatic disease
- Spondylosis deformans
- Dystrophic mineralization aortic arch

**INVOICE**

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The changes of the right proximal humerus are compatible with primary osseous neoplasia – such as osteosarcoma, chondrosarcoma, round cell tumor, hemangiosarcoma, other. FNA sampling ± bone biopsy can be used as advanced diagnostic tests to confirm the diagnosis.

**DATE**

1-31-22

At this point, there is no evidence of pulmonary metastatic disease, however small lesions may be effaced within the regions of pulmonary dystelectasis.



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The bilateral prominent axillary lymph nodes are suggestive for reactive hyperplasia - FNA sampling can be used to rule in/out malignant infiltration.

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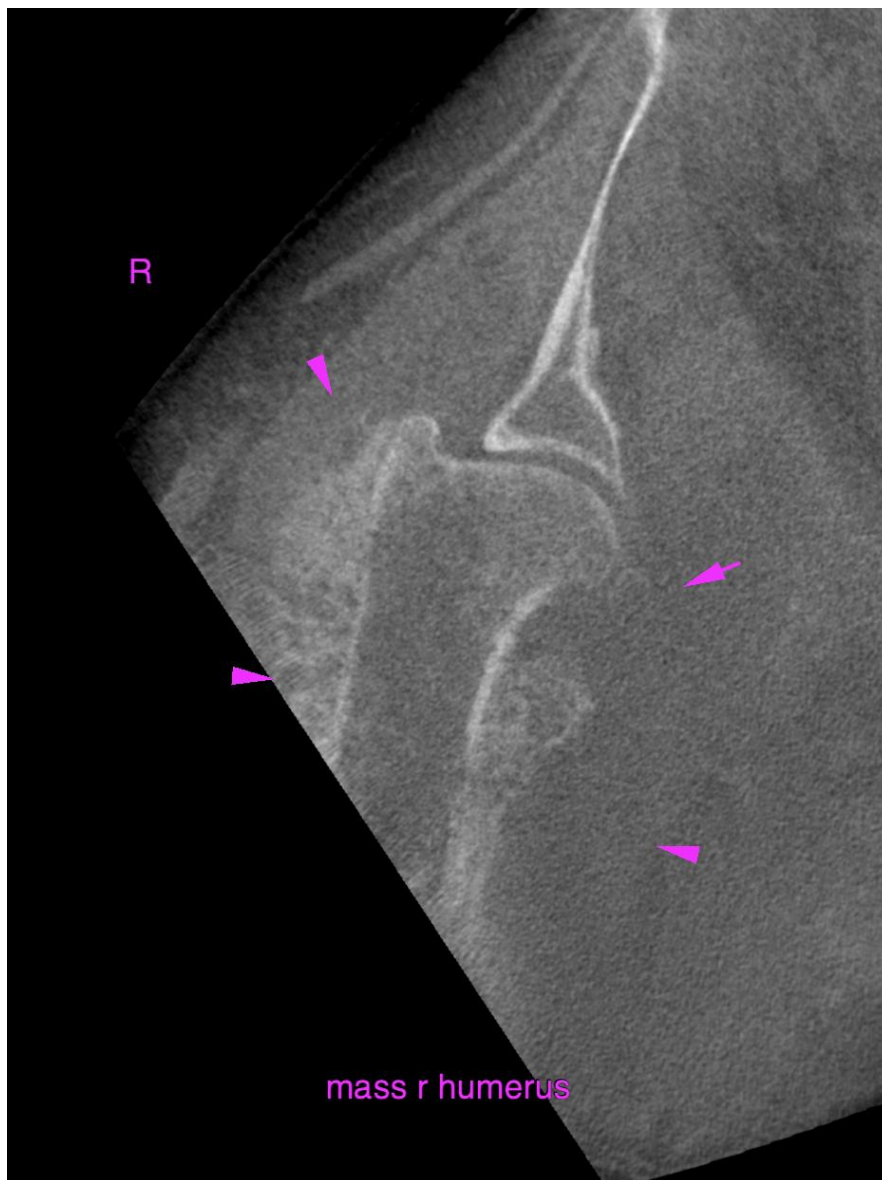
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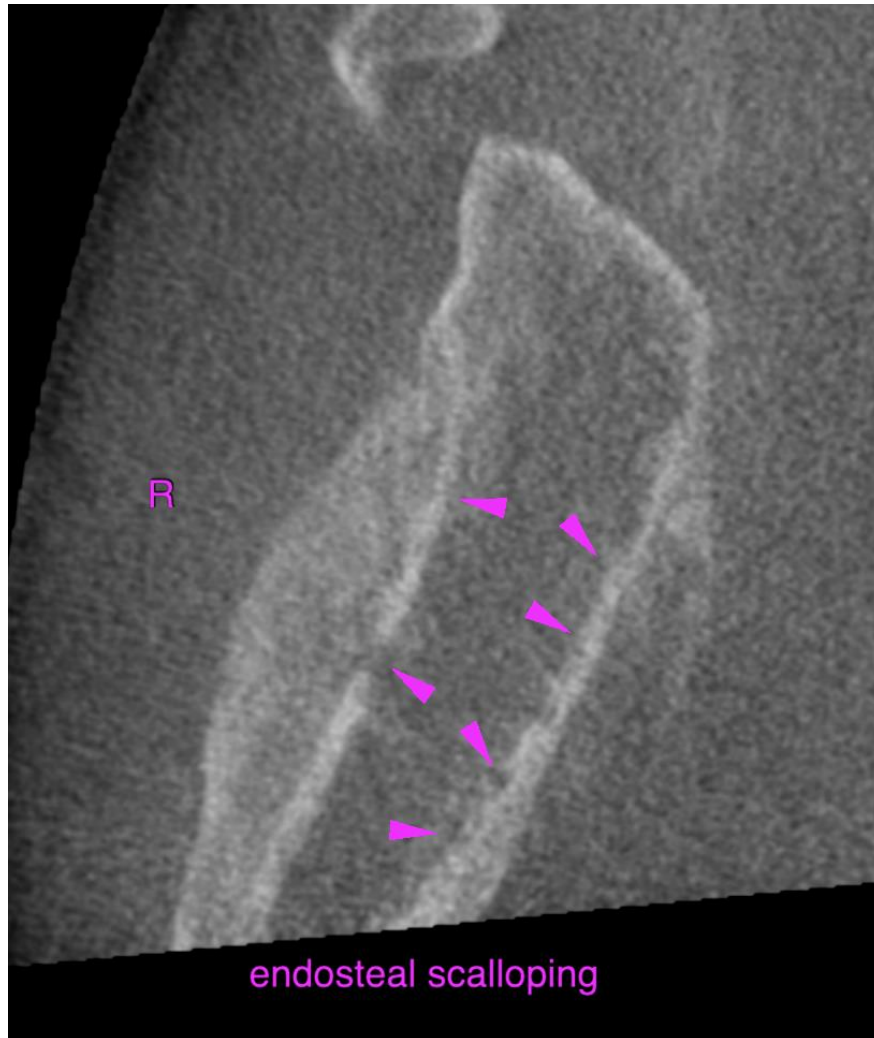
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
sebast.schaub@gmail.com