



PATIENT

Canella Giannini

PRESENTING CLINICAL SIGNS

7 days prior noticed swelling at distal dorsal aspect radius. Is ~ 1 cm domed firm. Sensitive to palpation and flexion. Grade 3 lame, fell down the stairs 2 nights prior. Client has been giving human aspirin 3 days. Since has developed nausea, vomit and anorexia.

SPECIES

Canine

RADIOGRAPHIC STUDY OF THE THORAX AND CARPUS/ANTEBRACHIUM

A right lateral projection of the thorax and radiographs of the - suspect right - antebrachium in two imaging planes are provided for review.

BREED

Mixed

RADIOGRAPHIC FINDINGS

Thorax

The vertebral endplates T5/T6 and T6/T7 present mild spondylosis formation.

SEX

Female Spayed

The extrathoracic soft tissues present homogeneous without abnormalities.

AGE

10 Years

The heart is of normal size and shape, there is no evidence of cardiac chamber or vascular enlargement. The pulmonary vasculature is within normal limits.

The trachea is normal in diameter and presents the anticipated course. The luminal outline of the trachea is smooth.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The bronchial tree presents with thin walls and tapers uniformly towards the periphery as expected.

The lung parenchyma presents the expected architecture and opacity; the intrapulmonary vascular branching is seen up to the third order lung vessels.

HOSPITAL NAME

Blandford Animal Hospital

The diaphragm is well delineated with even surface and the expected mild cranial bulging of the diaphragmatic cupola.

A well-defined, roundish mineral opaque body is superimposed on the ventral aspect of the liver, measuring approximately 1 cm in size.

REFERRING VET

Russ LaPierre

Antebrachium

No physical side markers are present, the antebrachium is considered as the right antebrachium.

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The distal radial dia-, meta- and epiphysis present an ill-defined zone of permeative osteolytic lesions with endosteal scalloping and brush-border to palisading periosteal new bone formation. A mild to moderate soft tissue swelling is seen at the same level of the distal radius-

RADIOGRAPHIC DIAGNOSIS

DATE

10-23-21

- Monostotic aggressive mixed osteoproliferative and osteolytic lesion distal (right) radius
- Suspect cholecystolithiasis versus superimposed dystrophic mineralization
- Spondylosis deformans



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- No evidence of pulmonary metastatic disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings are compatible with primary osseous neoplasia, such as osteosarcoma, chondrosarcoma, fibrosarcoma, other. Theoretically mycotic osteomyelitis is differential as well but considered unlikely. FNA sampling of the distal radius can be used for further definition.

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Recommend radiographs of the thorax in at least 2 imaging planes for full tumor staging.

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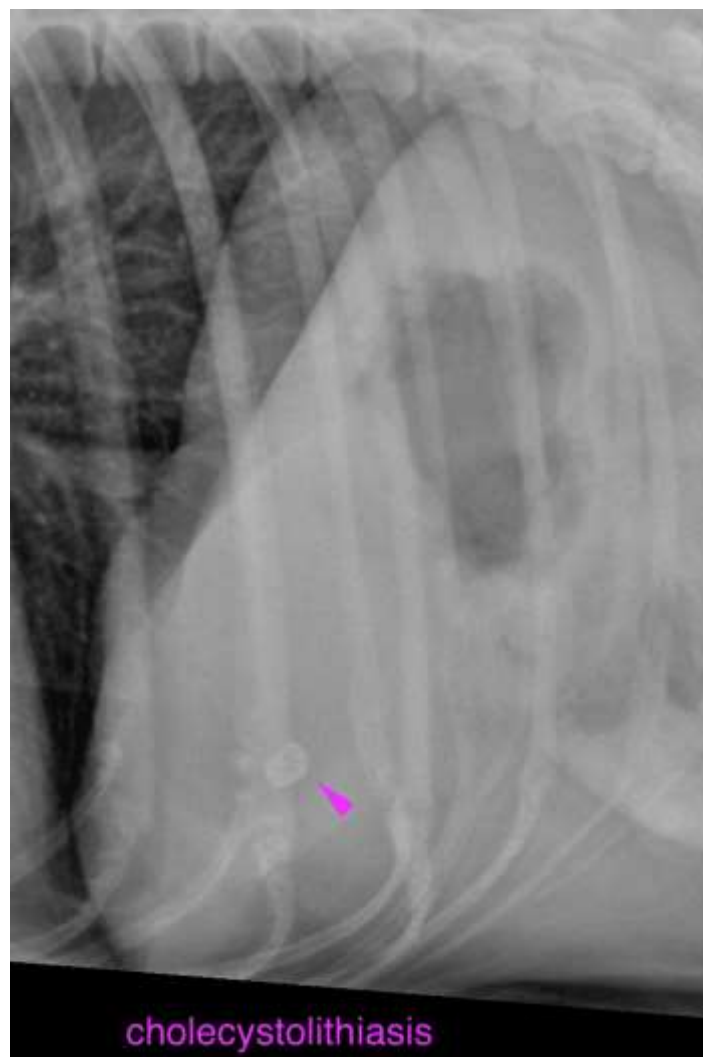
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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