



PATIENT

Athena Zasiewski

PRESENTING CLINICAL SIGNS

16 weeks old female great Dane dog presented for shifting pain , difficulty in rising up, low energy. Bloodwork: High phosphorus, high lymphocytes and Monocytes. Negative for Ehrlicia and lyme , The patient is eating adult kibble food.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Limping on the left front leg is more obvious. Temp 39.3C.

BREED

Great Dane

RADIOGRAPHIC STUDY OF THE ENTIRE SPINE, FRONT LIMBS AND HIND LIMBS

A complete set of radiographs of the spine, front limbs and hind limbs is provided for review.

RADIOGRAPHIC FINDINGS

The growth plates are generalized age related open.

SEX

Female

The osseous and surrounding soft tissue structures of the cervical, thoracic and lumbar spine are within normal limits.

The proximal metaphysis of the humerus bilaterally and the distal metaphysis of the radius, ulna, tibia and fibula bilaterally present a heterogeneous pattern with moth eaten osteolytic lesions.

AGE

17 Weeks

The periarticular bones of the shoulder, elbow, carpal, coxofemoral and stifle joints present smooth osseous margins without signs of intracapsular swelling.

RADIOGRAPHIC DIAGNOSIS

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

- Possible osteolytic lesions metaphysis proximal humerus, distal radius, ulna, tibia and fibula bilaterally
- Normal cervical, thoracic and lumbar spine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Lakeshore Woods
Animal Hospital

The heterogeneity of the multiple metaphysis might still present normal osseous remodeling due to growth of the large breed dog. However, metaphysitis or early stage of hypertrophic osteodystrophy are potentials here. Check clinically for signs of joint effusion to rule out polyarthritis.

REFERRING VET

Dr. Sam Masoud

If clinical signs are refractory to empirical management recommend follow up radiographs of the radius/ulna and the tibia in 1-2 weeks.

INVOICE

54473

DATE

10-5-22



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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

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