



## PATIENT

Jack Weidler

## SPECIES

Canine

## BREED

Rottweiler

## SEX

MN

## AGE

10Y

## WEIGHT

90

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet.  
DipECVDI

## IMAGING PERFORMED BY

Russ Lapierre

## HOSPITAL NAME

Blandford Animal  
Hospital

## REFERRING VET

Russ Lapierre

## INVOICE

72611

## DATE

11-8-25

## PRESENTING CLINICAL SIGNS

10/24/25 Wellness exam, normal PE and normal Senior panel screenig 10/31/25 presented for toe touching to nonweight bearing RF lameness. housemates play rough together hopped of couch few days ago and bc lame in RF PE Marked soft tissue swelling of right elbow medial and lateral,, growls when touched. Carried by clients; largely toe touching lame. Tx with carprofen and clavamox to cover for puncture abscess. Slight positive improvement. 11/08/25 recheck appt. mostly non weight bearing; carried in and out by clients, muzzled bc painful  
Abnormal PE/Chem/CBC/UA Results: Senior screen panel is NSF+

## RADIOGRAPHIC STUDY OF THE ELBOW JOINTS

Radiographs of the thorax in three imaging planes are provided for review, dated 10/31 & 11/8.

## RADIOGRAPHIC FINDINGS

The proximal segment of the ulna presents an ill-defined zone with permeative osteolytic lesions and mild sclerosis that is progressive in comparison to the images dated 10/31/25. At the caudal aspect of the olecranon a moderate soft tissue swelling is appreciated.

## RADIOGRAPHIC DIAGNOSIS

- Monostotic aggressive osteolytic lesions proximal right ulna
- Soft tissue swelling caudal to right ulna

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes of the proximal ulna are highly concerning for osseous neoplastic infiltration – due to the unusual location the odds for metastatic disease are higher than for primary osseous neoplasia (e.g. osteosarcoma, chondrosarcoma). Osteomyelitis is a less likely differential as well. Consider full tumor screening.



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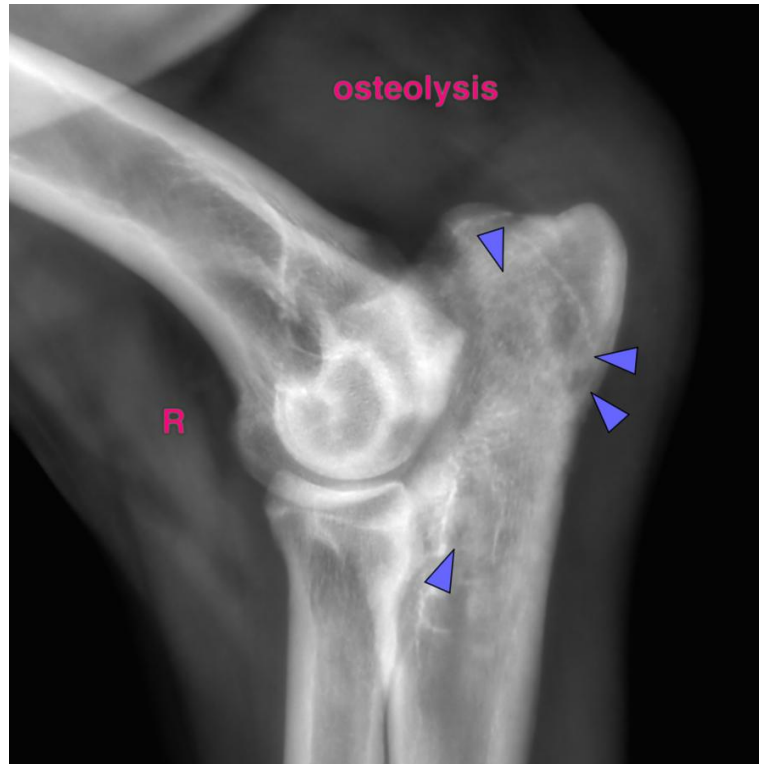
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
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