



**PATIENT**

Smokey Trombley

**PRESENTING CLINICAL SIGNS**

Pet has a 5 month history of lameness in the LR, slowly progress and only partially responsive to NSAIDs and gabapentin. Radiographs taken in October did not show significant changes, owner wanted to pursue more advanced diagnostics (no radiographs repeated at recheck in March 2022)

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY OF THE PELVIS/HIND LIMBS**

A high resolution pre- and post-contrast CT study of the pelvis/hind limbs is provided for review.

**BREED**

Cocker Spaniel

**COMPUTED TOMOGRAPHIC FINDINGS**

Multifocal moderate spondylosis formation is seen along the lumbar spine.

**SEX**

Level with the intervertebral disc space L6/L7, heterogeneous mineralized material is protruding into the right neuroforamen L6/L7.

MN

The lumbosacral intervertebral disc is moderately protruding into the vertebral canal, occupying approximately 35% of the cross-sectional area of the vertebral canal at the same level. Both coxofemoral joints present mild osteophyte new bone formation.

**AGE**

13 Years

The volume of the left thigh musculature is mild to moderately decreased. The left femoral diaphysis presents with a an ill-defined zone of permeative osteolysis and circumferential advanced immature periosteal new bone formation. The osteolytic zone is affecting nearly the entire diaphysis and distal left femoral metaphysis.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**HOSPITAL NAME**

Wilson Veterinary  
Hospital

- Monostotic aggressive mixed osteolytic & osteoproliferative lesion left femoral diaphysis
- Mild disuse atrophy left hind limb
- Right sided intervertebral disc extrusion L6/L7 with neuroforaminal stenosis
- Degenerative lumbosacral stenosis with potential dynamic compression of the cauda equina fibers
- Mild degenerative osteoarthritis coxofemoral joints bilaterally
- Spondylosis deformans

**REFERRING VET**

Dr.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The aggressive osseous lesion of the left femur is compatible with primary neoplasia of bone – such as osteosarcoma, chondrosarcoma, fibrosarcoma, hemangiosarcoma, round cell tumor. Metastasis is a potential, due to the atypical location in the diaphysis; in the pictured parts of the abdomen, no overt abnormalities are appreciated. Theoretically (mycotic) osteomyelitis is a potential, but the odds are low; there are no signs for accompanying reactive hyperplasia of the regional lymph nodes. FNA sampling ± bone biopsy can be performed for further definition.

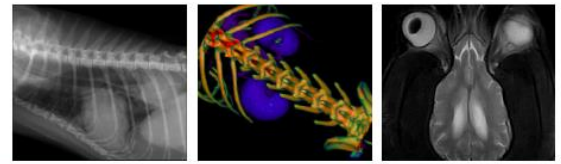
**INVOICE**

50996

**DATE**

3-17-22

Consider full tumor staging.



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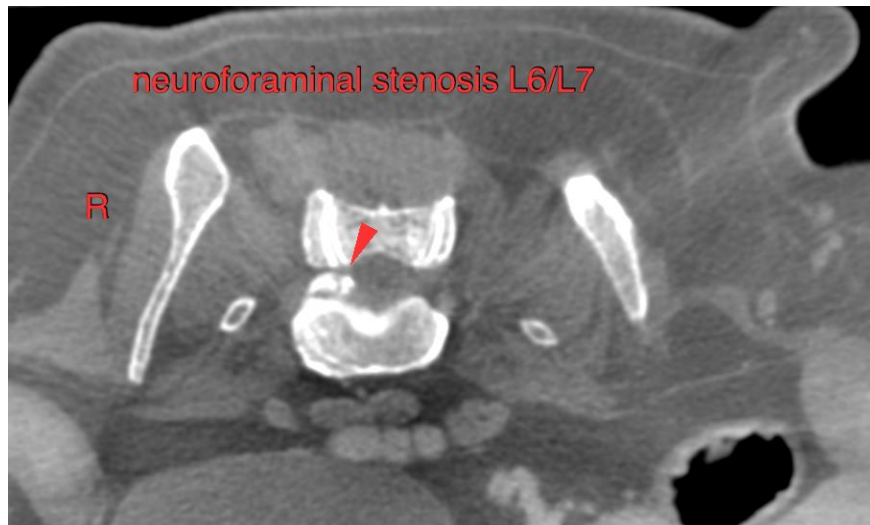
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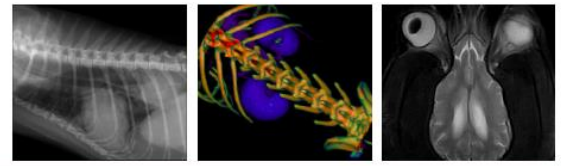
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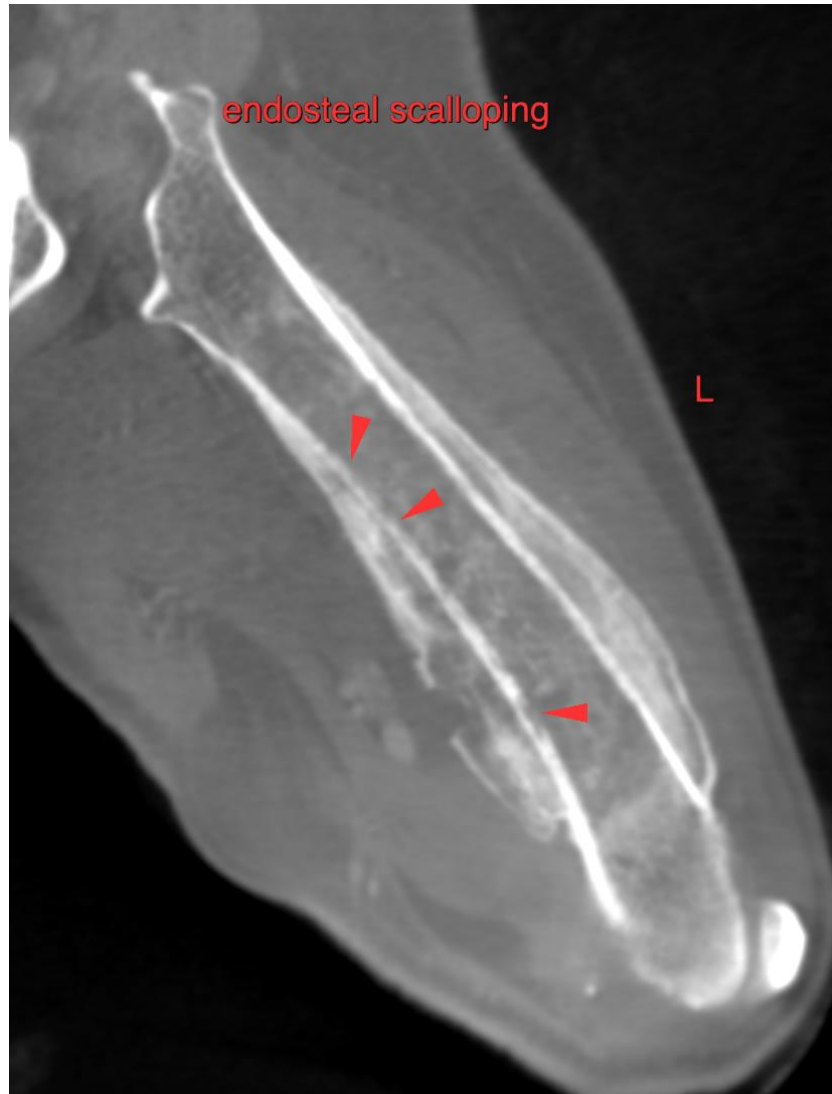
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
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