



## PATIENT

George Goss

## SPECIES

Canine

## BREED

Great Dane

## SEX

Male

## AGE

8

## WEIGHT

133 Pounds

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

## IMAGING PERFORMED BY

Dr. Matt Montresor

## HOSPITAL NAME

Foxfield VS

## REFERRING VET

Dr. Matt Montresor

## INVOICE

36569

## DATE

4/11/26

## PRESENTING CLINICAL SIGNS

History: R forelimb lameness x 3 weeks - no improvement on carprofen and gabapentin  
Abnormal PE/Chem/CBC/UA Results: Repeatedly painful on R shoulder flexion. NSF on rest of PE No recent CBC/Chem/UA - was unremarkable 6 months ago

## RADIOGRAPHIC STUDY OF THE RIGHT SHOULDER JOINT

A complete set of radiographs of the right shoulder joint are provided for review. Images are dated 3/30/26.

## RADIOGRAPHIC FINDINGS

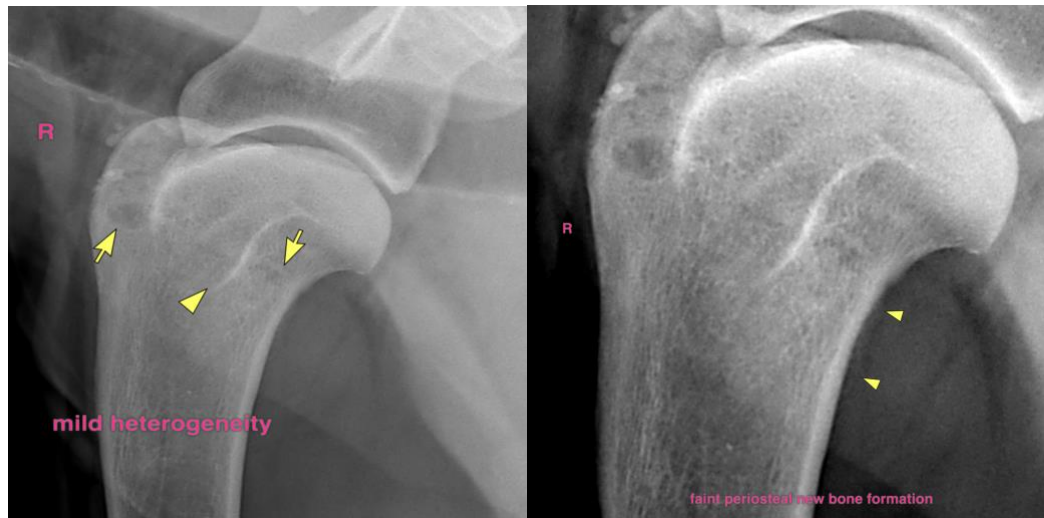
Along the cranioproximal aspect of the major tubercle of the right & left humerus, multiple granular mineralization are appreciated. The bicipital groove has a heterogeneous density with moth eaten defects. The proximal metaphysis of the right humerus presents a mild heterogeneous density. Along the caudal aspect of the proximal metaphysis of the right humerus, immature mild periosteal new bone formation – most accentuated in the oblique craniocaudal view.

## RADIOGRAPHIC DIAGNOSIS

- Mild heterogeneous medullary pattern and immature periosteal new bone formation proximal right humerus
- Calcifying tendinopathy supraspinatus tendon both shoulder joints

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appreciated changes of the right proximal humerus are concerning for early stage of an aggressive bone lesion – primary osseous neoplasia would be most common. Either follow up radiographs in 2-3 weeks or a CT study can be used for confirmation.





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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**, DVM, Dr. med. vet. DipECVDI  
[info@sonopath.com](mailto:info@sonopath.com)