



PATIENT

Patrick Cadelaria

PRESENTING CLINICAL SIGNS

O notice a lump on the left front leg 4/11/22 a biopsy was performed and sent for histopathology. ---neoplasm corresponds to a poorly differentiated sarcoma. Differentials include a Grade 3 soft tissue sarcoma (slightly favored), histiocytic sarcoma, or rhabdomyosarcoma.
 Abnormal PE/Chem/CBC/UA Results: Bloodwork was within normal limits.

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE THORAX AND LEFT THORACIC LIMB

A high resolution pre- and post-contrast CT study of the thorax and left thoracic limb are provided for review.

BREED

Border Collie Mix

COMPUTED TOMOGRAPHIC FINDINGS

The synovial lining of the left shoulder joint is markedly thickened and presents a heterogeneous contrast enhancement pattern. At the medial aspect of the left humerus, in the region of the medial head of the triceps muscle, an ovoid shaped, ill-defined, uniform soft tissue attenuating and post contrast mild hypoattenuating mass measuring 8.1 x 3.0 x 8.8 cm in size is visible. In the distal aspect – at the medial aspect of the left elbow joint – the mass presents a moderate heterogeneous contrast enhancement pattern – multiple metal attenuating skin staples are seen at the same level. The medial cortex of the left humeral diaphysis – in contact with the soft tissue mass – presents a mild scalloping surface. The right brachial artery & vein and the accompanying nerves are mildly deviated caudally.

SEX

MN

AGE

9 Years

Multifocal moderate spondylosis formation is seen along the thoracic spine.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

HOSPITAL NAME

Petroglyph Animal Hospital

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior, but compression atelectasis of the caudodorsal dependent aspects of the lung and randomly distributed punctuate mineralization of the lung parenchyma.

REFERRING VET

Dr. Raymond Hudgell

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

COMPUTED TOMOGRAPHIC DIAGNOSIS

INVOICE

51755

- Marked synovial thickening left shoulder joint
- Ill-defined soft tissue mass medial aspect of left humerus with aggressive osteolysis of the medial cortex of the left humerus
- History of biopsy of the left brachial mass
- Spondylosis deformans
- No evidence of pulmonary metastatic disease

DATE

4-26-22



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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study is fitting the history of sarcoma at the right medial aspect of the humerus and signs of osseous invasion. The thickened synovial capsule of the left shoulder joint is concerning for neoplastic transformation as well, potentially increasing the odds for histiocytic sarcoma.

Amputation of the left front limb can be considered as surgical treatment option.





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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