



PATIENT PRESENTING CLINICAL SIGNS

Magners Avalos
Presented to Rouge River Animal Hospital May 19/222 who performed sedated bilateral hindlimb and pelvic x-rays revealing hip dysplasia and abnormal left tibia. Magners was started on Metacam, Gabapentin, and Clavaseptin. Was seen again for repeat x-rays on June 27/22 showing progressive bone lesion.

SPECIES

Feline

COMPUTED TOMOGRAPHY OF THE ABDOMEN & HIND LIMBS

A pre- and post-contrast CT study of the abdomen and hind limbs in a bone and soft tissue reconstruction are provided for review.

BREED

DSH

COMPUTED TOMOGRAPHIC FINDINGS

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

SEX

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

MN

The adrenal glands are within normal limits for size, shape and organ architecture.

AGE

3 Years

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

The portal vein presents a normal order of its tributary veins and intrahepatic branching. No abnormal vessel is noted inside and outside of the liver parenchyma.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

HOSPITAL NAME

Animal Health
Partners

The left medial iliac lymph node is prominent.

In the left epaxial musculature level L4 to L6, multiple small gas inclusions are appreciated – likely secondary to preceding intramuscular injection.

REFERRING VET

Dr. Debbie Reynolds

The right coxofemoral joint presents mild osteophyte new bone formation. The acetabular groove bilaterally is mildly shallow.

The volume of the left iliopsoas muscle, left gluteal an thigh musculature is moderately decreased.

INVOICE

52722

The proximal segment of the left tibia presents an ill-defined zone with permeative osteolytic lesions and moderate cortical destruction – including the subchondral bone of the tibial condyles. Post contrast administration, the proximal segment of the left tibia presents with a mild heterogeneous contrast enhancing circumferential soft tissue swelling.

DATE

7-6-22

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Monostotic aggressive osteolytic lesion left proximal tibia
- Mild lymphadenopathy left medial iliac lymph node
- Moderate disuse atrophy musculature left hind limb



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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Differentials for the aggressive bone lesion of the left proximal tibia include (mycotic versus bacterial) osteomyelitis or primary osseous neoplasia (e.g. osteosarcoma, fibrosarcoma, chondrosarcoma). If not done so yet, recommend complementing workup by bone biopsy.

Consider complementing workup by FNA sampling of the left medial iliac lymph node to differentiate between reactive hyperplasia or metastatic disease.





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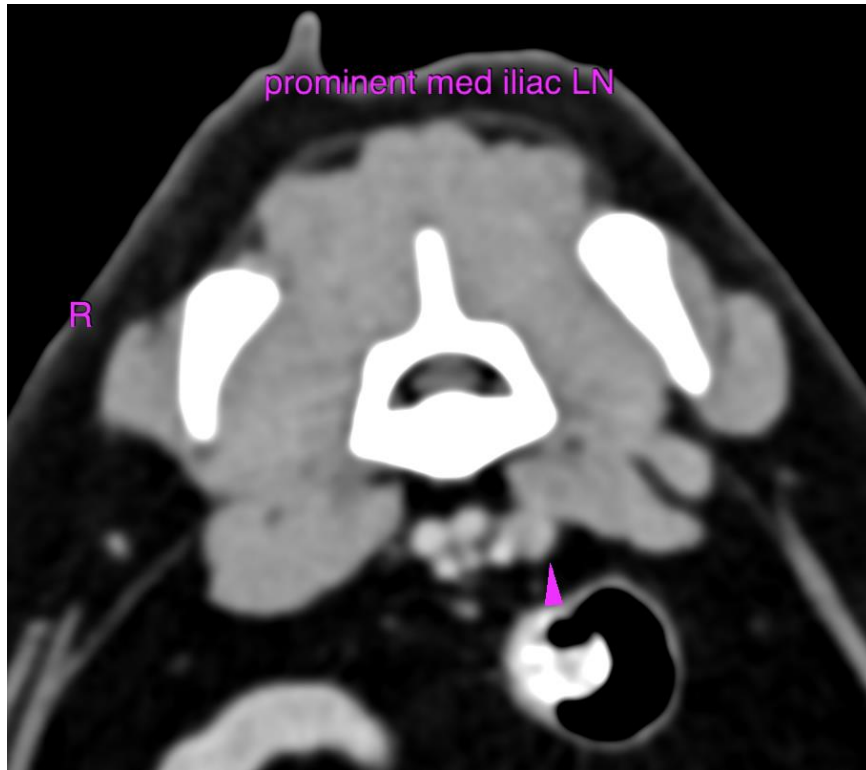
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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