



**PATIENT PRESENTING CLINICAL SIGNS**

Harley Adley Left 5th rib tumor osteosarcoma - rib resection and chest wall reconstruction performed 4/22/22. Treated with 2 doses of carboplatin, last dose was June 9. Increasing lameness on left thoracic limb.

**SPECIES COMPUTED TOMOGRAPHY OF THE THORAX**

Canine A pre- and post-contrast CT study of the thorax in a lung and soft tissue reconstruction is provided for review.

**BREED COMPUTED TOMOGRAPHIC FINDINGS**

Jack Russell Terrier The distal two thirds of the osseous part of the 4<sup>th</sup> to 6<sup>th</sup> left rib are absent. At the same level an ill-defined soft tissue mass is appreciated, bulging into the pleural cavity – presenting an extrapleural mass effect on the left cranial & caudal lung lobe at the same level – and extending along the soft tissues of the left thoracic wall cranially up to the level of the 2<sup>nd</sup> left rib and caudally up to the 7<sup>th</sup> left rib. In the dorsal aspect the mass can be appreciated up to the level of the left epaxial musculature level T2/T3. Level with T5, the mass is in contact with the vertebral body of T5.

**SEX**

FS

**AGE**

7 Years

The left cranial and left caudal lung lobe present with randomly distributed well-defined soft tissue nodules, measuring up to 8 mm in size.

The left sternal lymph node is moderately enlarged and has a heterogeneous contrast enhancement pattern.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

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

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

**HOSPITAL NAME COMPUTED TOMOGRAPHIC DIAGNOSIS**

Animal Health Partners

- History of osteosarcoma and partial resection of the left thoracic wall level with the 4<sup>th</sup> to 6<sup>th</sup> left rib
- Ill-defined soft tissue mass level with the resected segment of the left thoracic wall with extension of the mass along the soft tissues of the left thoracic wall involving the subscapular musculature
- Structured nodular interstitial lung pattern
- Lymphadenopathy left sternal lymph node

**REFERRING VET**

Jérôme Gagnon,  
DVM, DACVIM  
(Oncology)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INVOICE**

52753

The CT study is consistent with reoccurrence of the osteosarcoma of the left thoracic wall with diffuse growth along the soft tissues of the left thoracic wall including the subscapular musculature. The latter is explaining the front limb lameness. The structured nodular lung pattern is compatible with pulmonary metastatic disease. The enlarged left sternal lymph node is suggestive for metastatic disease. Due to the diffuse local growth, treatment options are limited to palliative measurements.

**DATE**

7-7-22



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Harley Adley

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Canine

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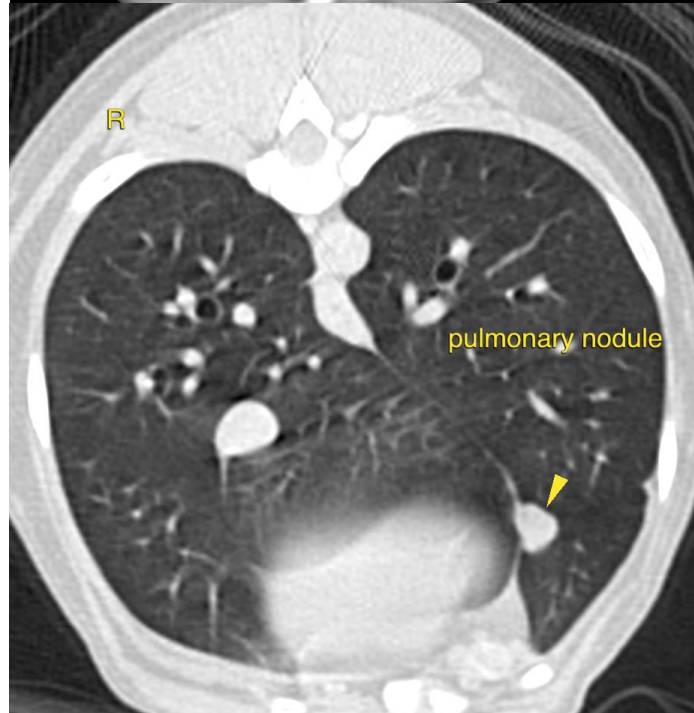
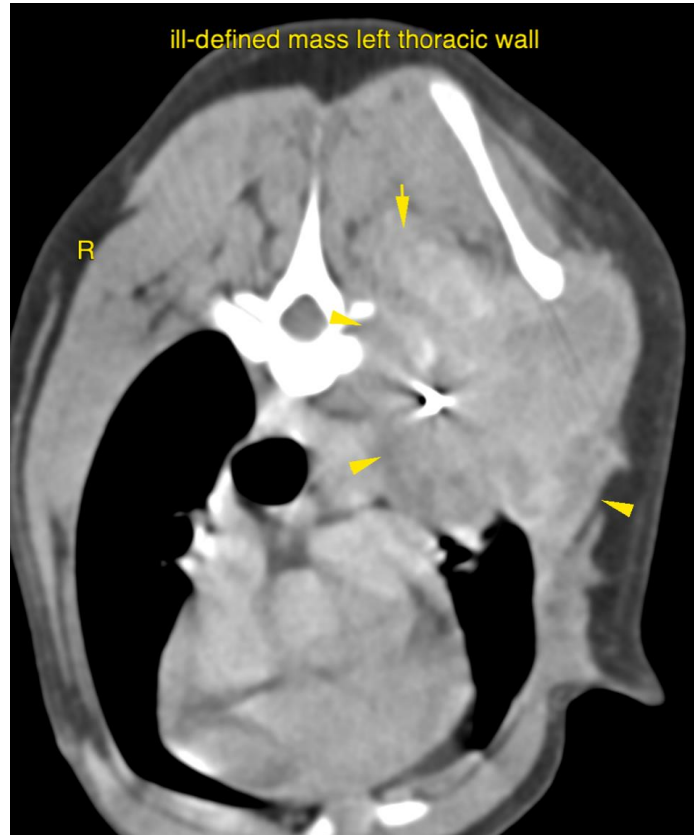
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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