



PATIENT PRESENTING CLINICAL SIGNS

Pia Colon History: Patient history of Extraskelatal osteosacoma. Removed a hardened mass adhered, painful, golf ball sized. Left perone for 5 day. Healed adequatly. Pathology Results: EXTRASKELETAL OSTEOSARCOMA MICROSCOPIC DESCRIPTION:MASS: Expanding the adipose tissue is an

SPECIES unencapsulated,poorly-demarcated, moderately to densely cellular, infiltrative neoplasm composed of haphazard streams and aggregates of neoplastic spindle to polygonal cells that often surround trabeculae of osteoidand woven bone within a mild fibro myxoid stroma. Neoplastic cells have indistinct cell borders and a minimal to moderate amount of amphophilic granular cytoplasm.

BREED Feline Nuclei are oval with finely stippledchromatin and a small magenta nucleolus. Anisocytosis and anisokaryosis are mild to moderate multinucleated cells. Mitoses are>20 per ten HPF (2.37 mm2).

DSH Foci of necrosis and edema are scattered throughout the neoplasm and few small lymphoid aggregates surround the periphery of the neoplasm. COMMENTS: Without confirmed association to the underlying bone, this is most consistent with an extraskelatal osteosarcoma. Radiographs are

SEX recommended to rule in or out bony involvement due the more aggressive behavior of the extraskelatal subtype. All osteosarcomas have the potential for distant metastases therefore clinical staging is also recommended.

Spayed Female

Abnormal PE/Chem/CBC/UA Results: CBC --- unremarkable CHEM --- unremarkable

AGE COMPUTED TOMOGRAPHIC STUDY OF THE SKULL, THORAX AND ABDOMEN

5 Years A high resolution pre- and post-contrast CT study of the skull and abdomen and a post-contrast CT study of the thorax are provided for review.

INTERPRETED BY COMPUTED TOMOGRAPHIC FINDINGS

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

Skull

The pictured parts of the dentition are complete and unremarkable in all jaw quadrants.

HOSPITAL NAME

Veterinary Image
Center

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

REFERRING VET

Dr. E. Diaz, DVM

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals are within normal limits.

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The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.

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PATIENT The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5 , the attenuation and contrast enhancement pattern is uniform.

Pia Colon

Thorax

SPECIES The bony and surrounding soft tissue structures are within normal limits.

Feline 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.

BREED

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

DSH

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.

SEX

The lung parenchyma presents the expected architecture and attenuation behavior.

Spayed Female

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

AGE

5 Years

Abdomen

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

INTERPRETED BY

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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.

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

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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.

REFERRING VET

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

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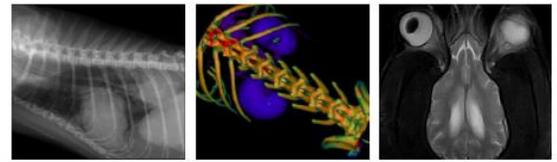
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The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

In the subcutaneous tissue of the left flank, an ill-defined, plaque like, uniform soft tissue attenuating and heterogeneous contrast enhancing mass is appreciated, extending from the cranial aspect

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PATIENT Pia Colon
of the left iliac wing up into the left inguinal fold of the left hind limb. The mass is in contact with the caudal left abdominal wall and left epaxial musculature and focal thickening of the left abdominal wall can be seen extending cranially up to the level of L4. The plaque like subcutaneous mass in the left flank is measuring approximately 5.3 x 1.3 x 7.5 cm in size.

SPECIES Feline
The left inguinal lymph node and left external iliac lymph node are prominent.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Plaque like soft tissue mass with central cavitation left flank with local diffuse invasive growth into the associated musculature
- Lymphadenopathy left inguinal lymph node and left external iliac lymph node
- No evidence of pulmonary metastatic disease
- Structural normal skull

SEX

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The subcutaneous mass in the left flank is highly suggestive for reoccurrence of extraskeletal osteosarcoma ± seroma formation. Complete surgical excision of the mass is considered not feasible as it is in close contact with the epaxial musculature, musculature of the left abdominal wall and left thigh musculature and presents signs of invasive growth. The chances of palliative chemotherapy/radiation therapy can be discussed with oncologist.

AGE

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The odds for metastatic spread to the regional lymph nodes are high.

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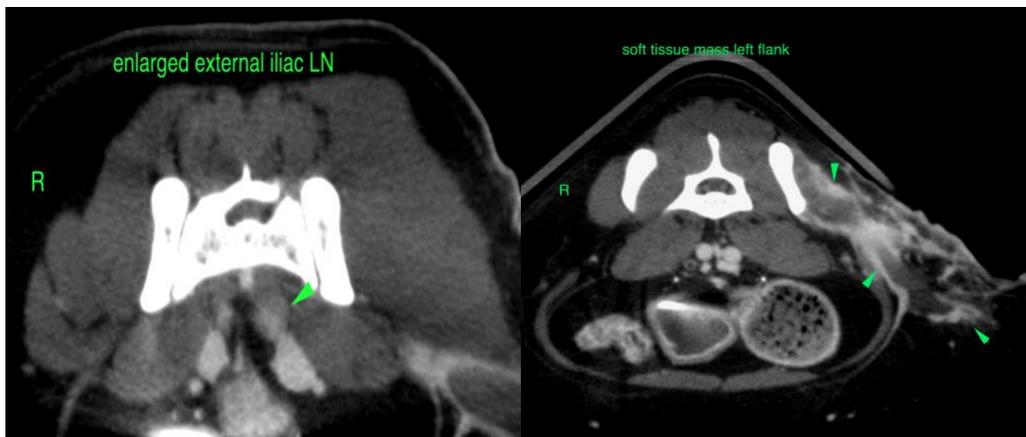
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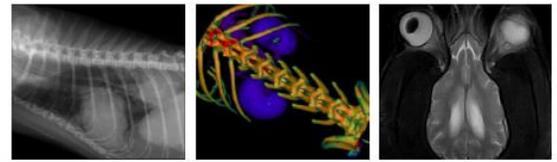


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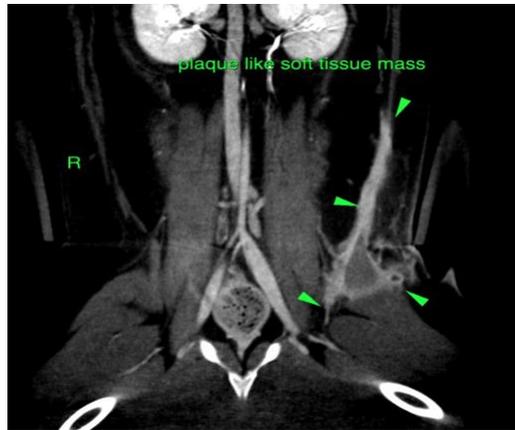
Pia Colon

SPECIES

Feline

BREED

DSH



SEX

Spayed Female

AGE

5 Years

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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