



## PATIENT

Jewel Stooksbury

## SPECIES

Feline

## BREED

DLH

## SEX

Spayed Female

## AGE

11 Years

## WEIGHT

14.6 lbs

## INTERPRETED BY

Dr. Mauro Caldas MV,  
CBRV

## IMAGING PERFORMED BY

Tina Lynn CVT &  
George Eales, DVM

## HOSPITAL NAME

Green Prairie Animal  
Hospital

## REFERRING VET

Dr. Captain Illini-  
Chatham

## INVOICE

16360

## DATE

06/04/26

## PRESENTING CLINICAL SIGNS

Started w/upper respiratory Congestion on March 7, 2026 Treated with NeoPolyDex, Recheck 2 months unilateral nasal discharge left side and slight swelling of 3rd eyelid Continued w/NeoPolyDex and another dose of Convenia

## COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post-contrast images provided for review. The sides are mislabeled on images.

## COMPUTED TOMOGRAPHIC FINDINGS

Nasal cavity revealed fluid attenuated content on the left side with poorly delimited aggressive soft tissue mass on the ethmoturbinal region, invading the left orbit with mild lateral exophthalmos measuring 2.4 x 1.6 x 2.3 cm size (long x wide x tall). No cribriform lysis is seen.

The brain presents with a small hypervascular mass beside the middle line on the frontal lobe measuring 0.61 x 0.35 x 0.63 cm size (long x wide x tall). Tympanic cavities are partially filled with fluid content on both sides. No bullae wall lysis is seen. Dentition appears normal. Medullary bone sclerosis on the right mandible on premolar portion. Mandibular and retropharyngeal lymph nodes appear normal.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

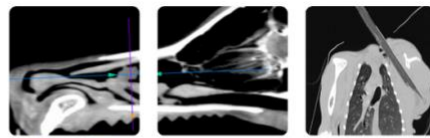
- Small aggressive mass on the left nasal cavity with orbital invasion.
- Small extra-axial brain mass on the right frontal region.
- Bilateral media otitis.
- Right mandibular sclerosis

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The nasal cavity lesion is suspected to be a primary neoplasm i.e. nasal carcinoma, lymphoma or squamous cell carcinoma most likely, with secondary rhinitis. Fungal rhinitis cannot be ruled out. Rhinoscopy with biopsies and thoracic image staging is recommended, with oncological follow up based on histological finds.

The brain mass appears to be a small meningioma, but metastasis cannot be ruled out. Empirical therapy for bacterial media otitis can be considered and fibroscopy with culture if not responding to empirical therapy.

The mandibular bone sclerosis is unclear but sclerosing osteomyelitis or early bone neoplasm can be considered and a bone biopsy is indicated.



**PATIENT**

Jewel Stooksbury

**SPECIES**

Feline

**BREED**

DLH

**SEX**

Spayed Female

**AGE**

11 Years

**WEIGHT**

14.6 lbs

**INTERPRETED BY**

Dr. Mauro Caldas MV,  
CBRV

**IMAGING  
PERFORMED BY**

Tina Lynn CVT &  
George Eales, DVM

**HOSPITAL NAME**

Green Prairie Animal  
Hospital

**REFERRING VET**

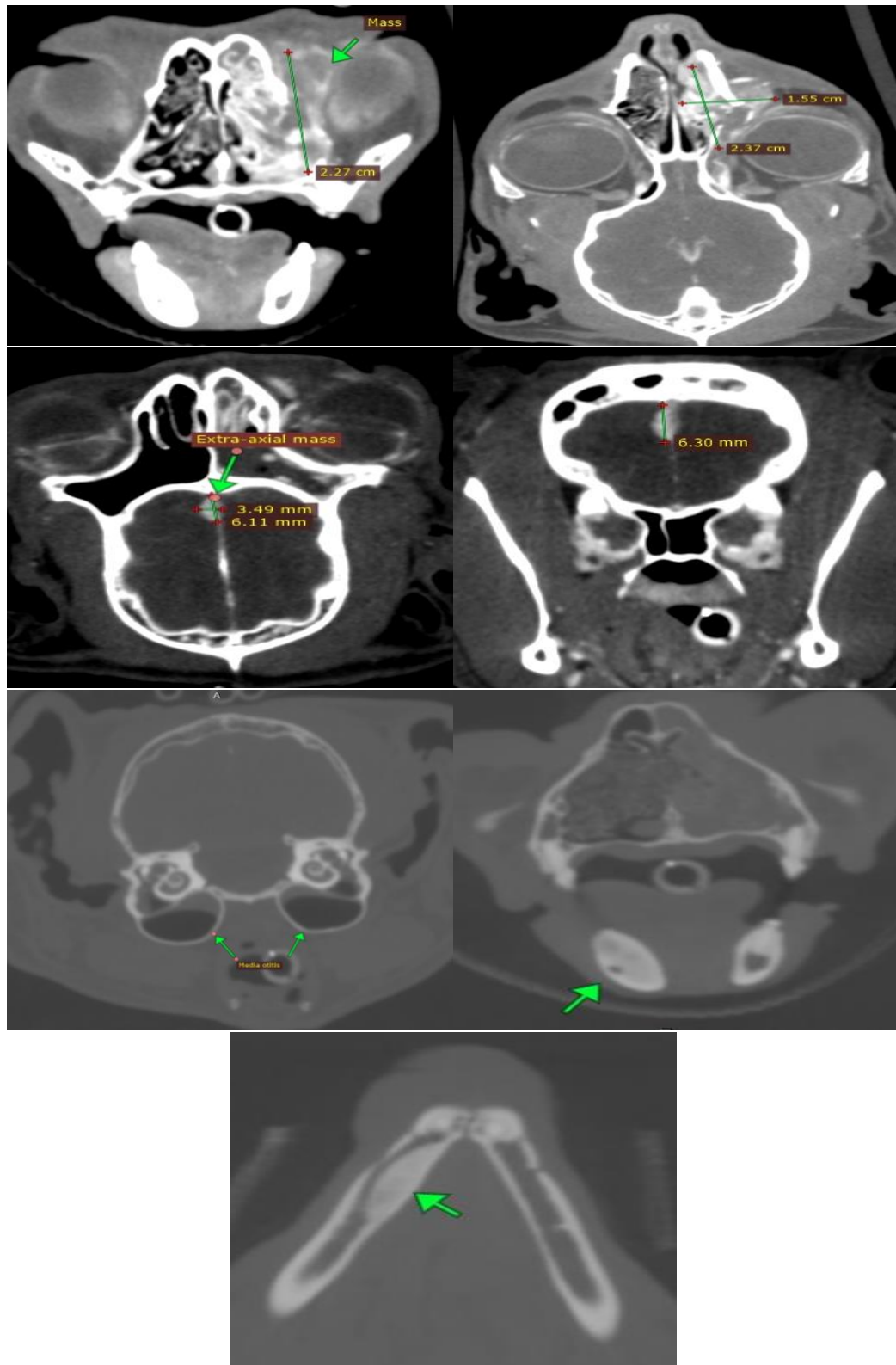
Dr. Captain Illini-  
Chatham

**INVOICE**

16360

**DATE**

06/04/26





## PATIENT

Jewel Stooksbury

## SPECIES

Feline

## BREED

DLH

## SEX

Spayed Female

## AGE

11 Years

## WEIGHT

14.6 lbs

## INTERPRETED BY

Dr. Mauro Caldas MV,  
CBRV

## IMAGING PERFORMED BY

Tina Lynn CVT &  
George Eales, DVM

## HOSPITAL NAME

Green Prairie Animal  
Hospital

## REFERRING VET

Dr. Captain Illini-  
Chatham

## INVOICE

16360

## DATE

06/04/26

The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

**Dr. Mauro Caldas MV, CBRV**

[info@sonopath.com](mailto:info@sonopath.com)