



PATIENT PRESENTING CLINICAL SIGNS

Callie Jung Patient has chronic lymphocytic leukemia that is well controlled currently with prednisolone and chlorambucil. She has a non-pruritic scaling skin disorder for which work up is proceeding including biopsy but diagnosis is uncertain at this time. The reason for the skull radiographs is because she has an intermittent unexplained epistaxis. It began about 3 to 4 months ago.

SPECIES

Canine

BREED

Golden Retriever

Bleeding occurs only every few days and was initially seen on the right side. Then about six weeks ago it seemed to stop. However, it returned this week, but this time the epistaxis was from the left side. The bleeds are short, sometimes the blood is clotted, and she has not had to be treated specifically for this. We have started her this week on yunnan bai yoo. She acts like she feels well. Abnormal PE/Chem/CBC/UA Results: Her physical examination is normal except for the intermittent epistaxis and the scaling dermatopathy. A coagulation profile was normal including platelets, PT, PTT, and buccal mucosal bleeding time. The only abnormality was increased fibrinogen. Current cbc, chems, ua, and thyroid panel are wnl.

SEX

Female Spayed

RADIOGRAPHIC STUDY OF THE SKULL & DENTAL ARCADES

Lateral dorsoventral, craniocaudal oblique open mouth view, and oblique views of the 4 quadrants totaling 7 images available for review.

AGE

10 Years

RADIOGRAPHIC FINDINGS

Mildly increased soft tissue opacity is noted within both nasal cavities, R>L, with no evidence of aggressive osteolytic lesions or turbinate destruction.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDF

The dental arcades appear to be complete and intact. Mild generalized horizontal atrophy of the alveolar crest is seen in all quadrants with no evidence of significant periodontal disease, dental-nasal fistula formation, or aggressive bone lesions.

The temporomandibular joints, frontal sinuses, and tympanic bullae present within normal limits.

HOSPITAL NAME

Friendship Springs
Veterinary Care

The zygomatic arches are intact.

RADIOGRAPHIC DIAGNOSIS

- Increased soft tissue opacity of the nasal passage, R>L, with intact paranasal bones.

REFERRING VET

Trae Cutchin

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study reveals mild increase in soft tissue opacity within the nasal passages. Differential diagnosis includes nasal hemorrhage, rhinitis, and less likely soft tissue neoplasia. No evidence of aggressive bone lesions or turbinate destruction in terms of fungal infection or neoplasia is seen radiographically at this point. Nondestructive rhinosinusitis, systemic hypertension, paraneoplastic syndrome, coagulopathy, neoplasia, and destructive rhinitis as well as nasal foreign material are general considerations. Destructive rhinitis, neoplasia, and coagulopathy appear to be unlikely based on the radiographic presentation and clinical history of the patient. Rhinitis, systemic hypertension, paraneoplastic syndrome, and early malignancy remain a potential. There is no evidence of significant dental lesions. Rhinoscopy with sampling and/or CT could be considered for further definition.

INVOICE

56242

DATE

1-17-23



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Callie Jung

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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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