



PATIENT

Sadie Winderm

PRESENTING CLINICAL SIGNS

History of acute onset of stertorous breathing three weeks ago that did not improve with steroids or antibiotics. Suspected mass seen on top of soft palate at the caudal nasopharynx on rhinoscopy.

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & THORAX

Plain and post contrast studies of the head in soft tissue and bone windows and plain and post contrast studies of the thorax in soft tissue and lung windows available for review.

BREED

Golden Retriever

The post contrast study of the head unfortunately still does not cover the mass after reupload.

COMPUTED TOMOGRAPHIC FINDINGS

SEX

FS

Head

A relatively well delineated mildly hypoattenuating mass of approximately 31mm length, 28mm width, and 19mm height is seen within the nasopharynx. The mass is mildly shifted towards the right of the midline. The nasopharyngeal lumen is completely occupied by the mass. Ventral deviation of the soft palate is seen, and the mass appears to be attached to the lateral and dorsal nasopharyngeal walls. However, it cannot be delineated clearly from the soft palate either. No evidence of concurrent otitis media is seen. There is no evidence of aggressive bone lesions.

AGE

1 Year

The regional lymph nodes present within normal limits.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The nasal cavities and frontal sinuses present within normal limits.

Thorax

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

HOSPITAL NAME

Animal Health
Partners

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 are uniform and considered within normal limits.

REFERRING VET

Dr. Westgarth

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

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.

INVOICE

49991

The lung parenchyma presents the expected architecture and attenuation behavior.

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

DATE

1-31-22



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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Nasopharyngeal soft tissue mass causing upper airway obstruction.

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Canine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

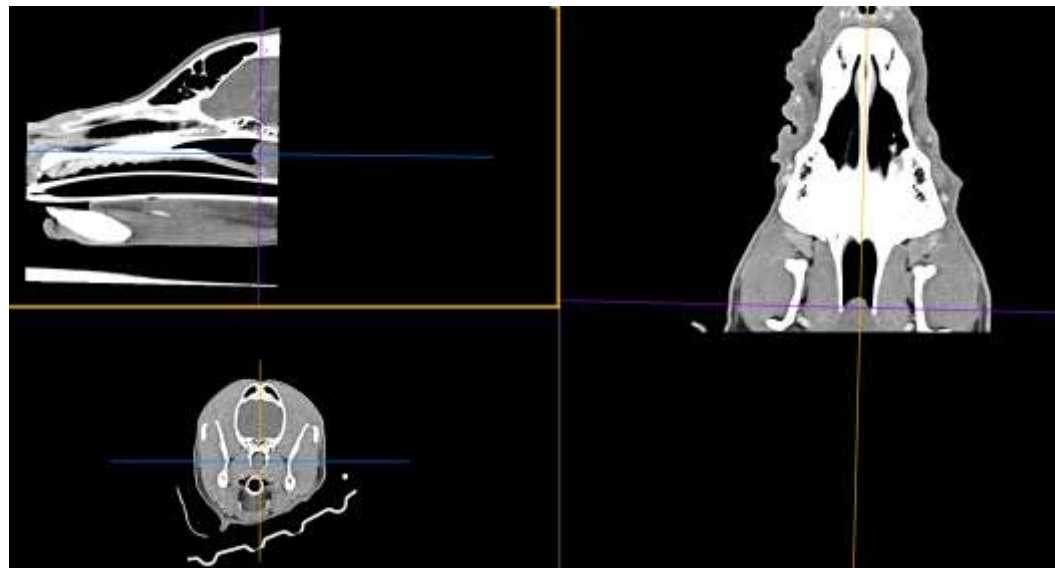
The CT study reveals a well delineated nasopharyngeal soft tissue mass which completely obstructs the nasopharynx. The position and CT features resemble that of a nasopharyngeal polyp; however, no concurrent otitis media is seen at this time. Hence, other differential diagnoses such as soft tissue sarcoma, fibroma, round cell neoplasia, and other have to be considered and should be ruled out by means of sampling/excisional biopsy.

BREED

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SEX

FS



AGE

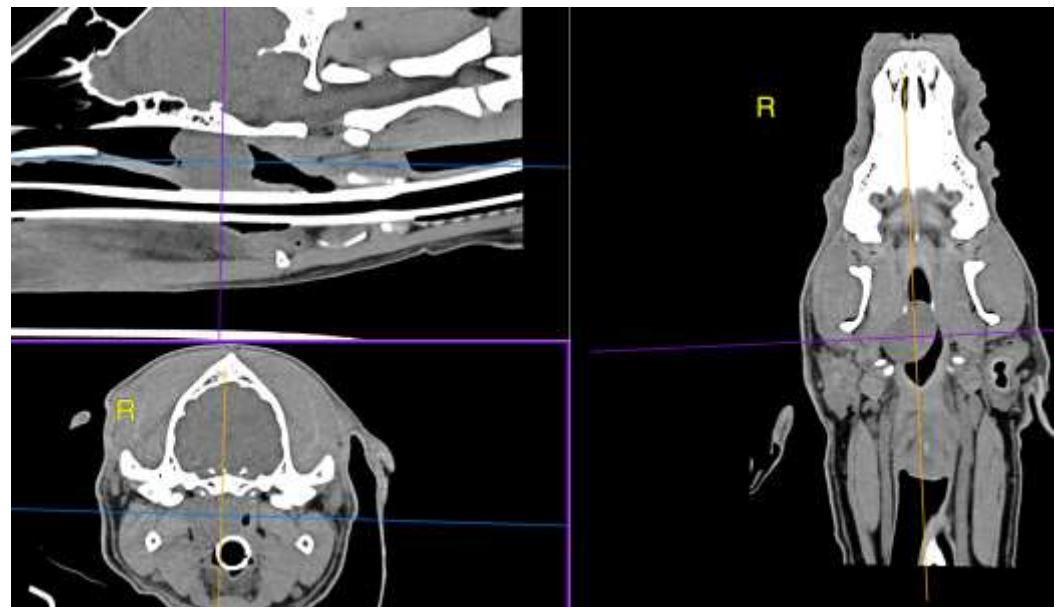
1 Year

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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.

SPECIES

Canine

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.

BREED

Goleden Retriever

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SEX

FS

AGE

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