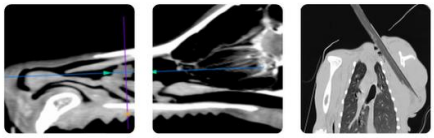

PATIENT

Bixby Wood

SPECIES

Feline

BREED

Maine Coon Mix

SEX

Female

AGE

12

WEIGHT

13lbs

INTERPRETED BY

Nele Eley (Ondreka), DVM Dr. med. vet., DipECVDI

IMAGING PERFORMED BY

Colin Boyd

HOSPITAL NAME

Aggie Animal Dental Center

REFERRING VET

Colin Boyd

INVOICE

73248

DATE

1-8-26

PRESENTING CLINICAL SIGNS

CBCT performed due to tooth resorption. Incidental finding on suspect right sided nasal cavity lesion. Abnormal PE/Chem/CBC/UA Results: Chronic neutropenia. Several months hx of mild sneezing and right sided nasal discharge.

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain study available for review only.

COMPUTED TOMOGRAPHIC FINDINGS

There is a focal area of extensive mucosal thickening and turbinate distortion and sclerosis in the mid third of the right nasal cavity giving a rounded appearance with mild mass effect on adjacent structures. Mild deviation of the nasal septum is noted. The adjacent right nasal bone is thinned consistent with chronic pressure related atrophy. No aggressive bone lysis or obstruction is observed. The remaining nasal cavities and paranasal sinuses are unremarkable. There is no evidence of regional lymphadenomegaly. No signs of ongoing rhinitis are seen.

Advanced resorptive changes of multiple dental roots are seen most pronounced in teeth 104 and 204.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Focal nonaggressive lesion of the mid right nasal cavity with mucosal thickening, turbinate sclerosis, and mild mass effect.
- Pressure related atrophy of the adjacent nasal bone.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals a focal lesion in the right nasal cavity with sclerosis, mucosal swelling, and mild mass effect. The lesion lacks aggressive features such as lysis or invasive behavior. The thinning of the adjacent nasal bone is consistent with chronic pressure effect rather than active destruction. Differential considerations include benign nasal polyp or chronic focal inflammatory hyperplasia. Early or slow growing neoplasia can never be ruled out entirely but are considered highly unlikely at this point. Rhinoscopy can be performed for direct visualization and potential biopsy for a definitive diagnosis. Monitoring for progression is recommended.

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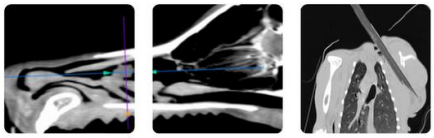

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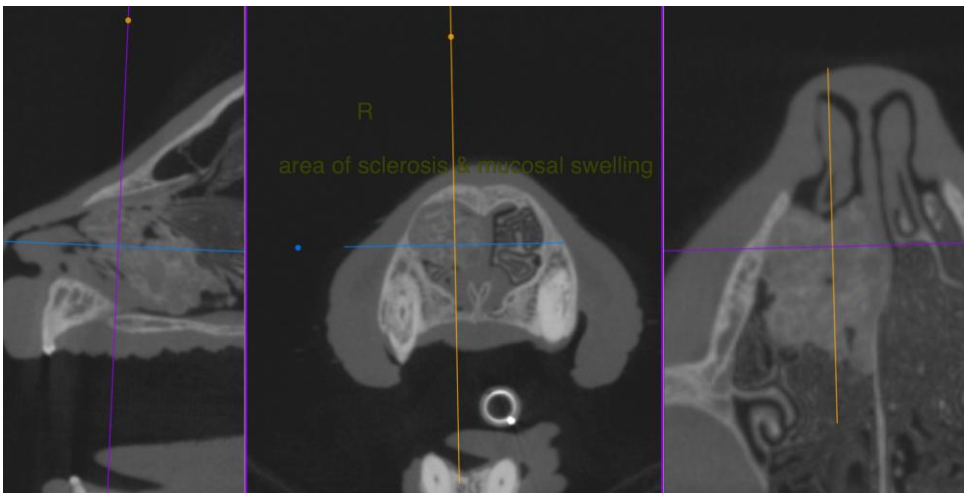

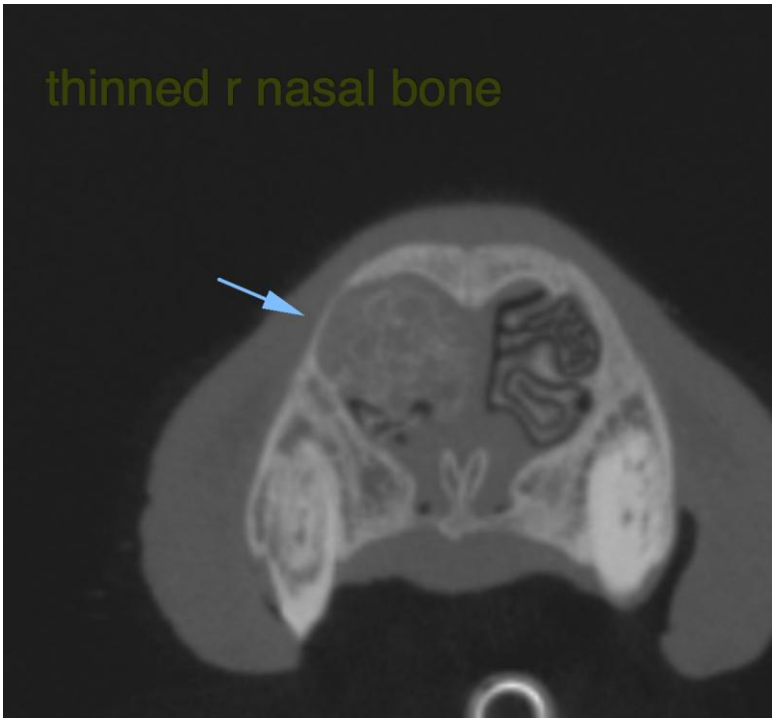

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley (Ondreka), DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
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