



**PATIENT**

Denny Vorel

**PRESENTING CLINICAL SIGNS**

Denny presented for serous bloody discharge from the left nostril and swelling over the left facial bone. He has a large subcutaneous mass over left thorax - previous FNA performed at another facility - lipoma. Denny has been prescribed gabapentin for hip pain.

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC STUDY OF THE HEAD**

Plain and post contrast studies available for review.

**BREED**

Border Collie Mix

**COMPUTED TOMOGRAPHIC FINDINGS**

The CT study reveals a 5.5 x 3.0 cm sized irregular shaped and ill-defined soft tissue mass within the mid and caudal third of the left nasal cavity. Severe regional turbinate destruction is noted. The mass presents heterogeneous contrast enhancement. There are polyostotic aggressive osteolytic changes of the left bony orbita, left hard palate, left nasal, frontal, and maxillary bones allowing for extension of the mass into the left orbita as well as onto the dorsum of the nose. The mass also extends into the nasal fundus. Permeative interruptions of the nasal septum are seen. The cribriform plate is intact. The left frontal sinus is filled with fluid attenuating contrast negative material.

**SEX**

MN

**AGE**

12 Years

Mild symmetric enlargement of the left medial retropharyngeal lymph node is seen. The submandibular lymph nodes present within normal limits.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Soft tissue mass with aggressive biological behavior within the left nasal cavity with extra nasal extension into the left orbita and onto the dorsum of the nose with mild left sided exophthalmos - no evidence of intracranial extension of the mass.
- Secondary obstructive left frontal sinusitis.
- Mild left sided medial retropharyngeal lymphadenomegaly.

**HOSPITAL NAME**

Critical Vet  
Care/Suncoast  
Veterinary

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT findings are compatible with malignant soft tissue neoplasia within the left nasal cavity which extends into the left orbita and onto the dorsum of the nose by means of aggressive osteolysis of multiple paranasal bones. At this time, there is no evidence of intracranial extension. Nasal adenocarcinoma or other carcinoma is a primary differential diagnosis. Lymphosarcoma and soft tissue sarcoma cannot be ruled out entirely but is thought less likely. Final diagnosis will require tissue sampling for histology.

**REFERRING VET**

Dr. Young

The lymph node changes are suggesting reactive hyperplasia. Early metastatic disease can be ruled out by means of fine needle aspiration.

**INVOICE**

55713

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12-19-22



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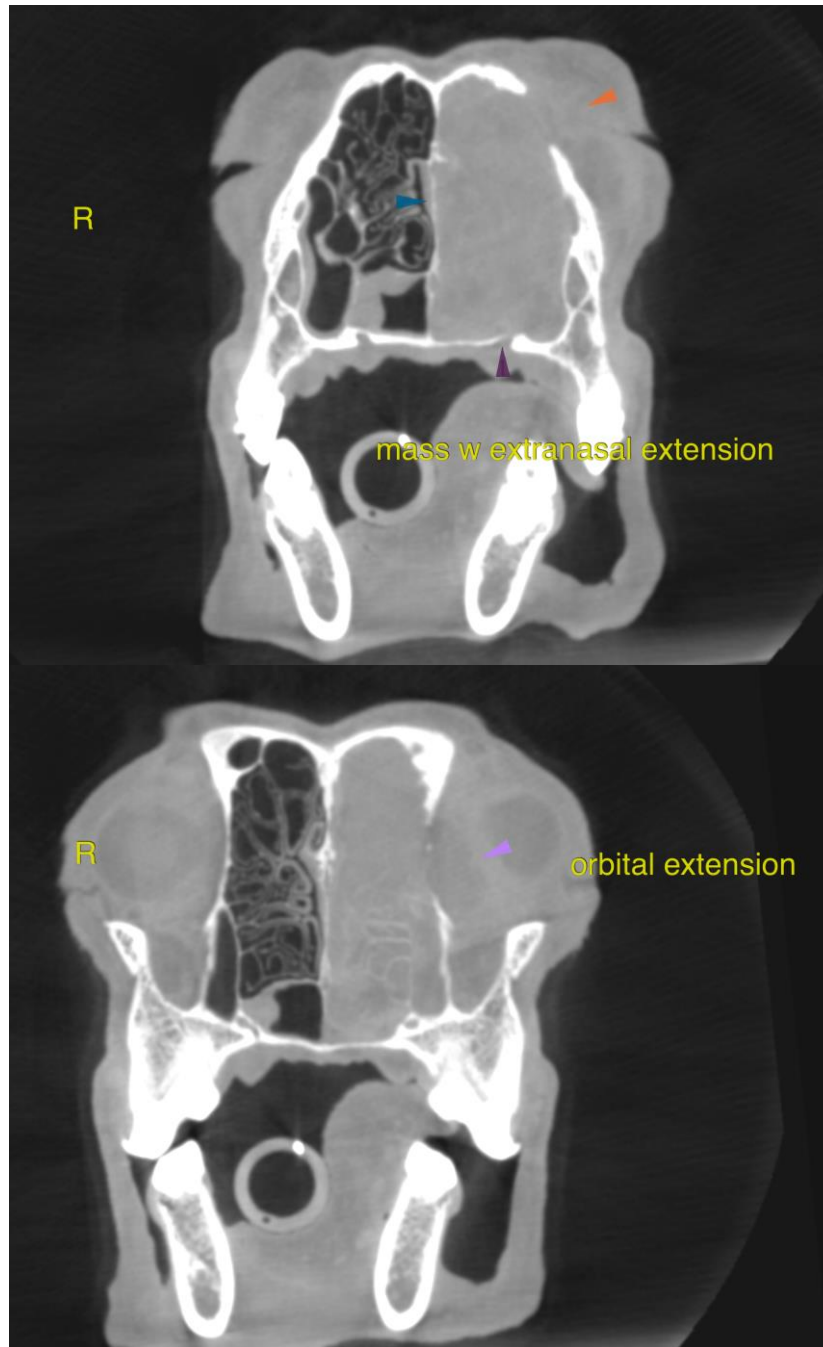
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**SPECIES**

Canine

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Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology  
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