



**PATIENT**

Oscar Rhodes Taylor

**PRESENTING CLINICAL SIGNS**

Occasional epistaxis LHS and nasal discharge, suspect tumour LHS,  
Abnormal PE/Chem/CBC/UA Results: Raised liver parameters

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC STUDY OF THE HEAD**

Plain and post contrast studies available for review.

**BREED**

Border Collie

**COMPUTED TOMOGRAPHIC FINDINGS**

The CT study reveals an irregular shaped and ill-defined soft tissue attenuating mass within the mid and caudal third of the left nasal cavity. The mass measures approximately 7.5 cm in length and 2.5 cm in diameter. Extensive regional turbinate destruction is noted as well as aggressive bone lysis of the hard palate. Multifocal interruptions of the nasal septum are seen. The mass extends into the oral cavity through the defect in the hard palate as well as into the right nasal cavity through the defects within the nasal septum. The cribriform plate is intact. No orbital extension is noted at this time. The left frontal sinus contains a moderate amount of fluid attenuating material with a meniscus sign.

**SEX**

Male

The left medial retropharyngeal lymph node presents mild symmetric enlargement.

**AGE**

12 Years, 4 Months

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Soft tissue mass with aggressive biological behavior within the left nasal cavity.
- Secondary obstructive left frontal sinusitis.
- Mild left medial retropharyngeal lymphadenomegaly.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**HOSPITAL NAME**

Myerscough  
Veterinary Group

The CT findings are compatible with a malignant soft tissue neoplasia within the left nasal cavity such as adenocarcinoma, other carcinoma, and less likely round cell neoplasia or soft tissue sarcoma. The mass presents aggressive bone lysis of the bony nasal septum and hard palate. Intracranial extension is not noted at this time. Final diagnosis would require tissue sampling for histology.

**REFERRING VET**

Maliha Chowdhury

The changes of the left medial retropharyngeal lymph node are equivocal for reactive hyperplasia versus early metastatic disease. Fine needle aspiration is recommended for further definition.

**INVOICE**

55725

**DATE**

12-20-22



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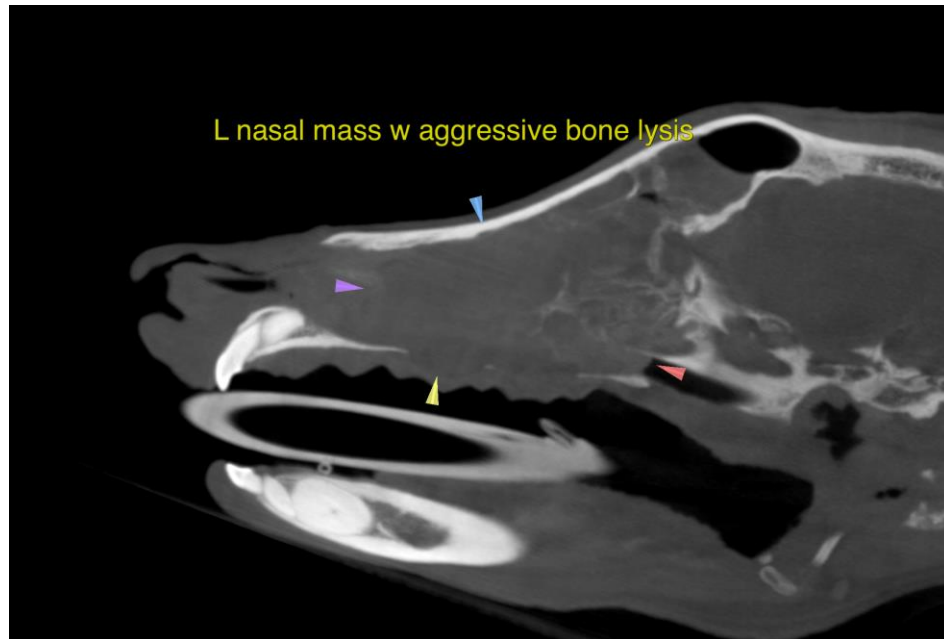
Maliha Chowdhury

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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.

**Nele Eley**, DVM, Dr. med. vet., DipECVDI  
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