

PATIENT

Koby Jack Cheese
Ramirez

SPECIES

Canine

BREED

Labrador

SEX

MN

AGE

4Y

WEIGHT

92lbs

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Mobile Pet Imaging

HOSPITAL NAME

Mobile Pet Imaging

REFERRING VET

Armstrong

INVOICE

73999

DATE

3-2-26

PRESENTING CLINICAL SIGNS

Patient has experienced increased epistaxis since a traumatic event occurred at the store. A shelf fell on the pet while in the store in November 2025. The bleeding is predominantly from the left nostril and there are increased occasional snoring sounds.

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

The CT study reveals a large, irregular shaped, and ill-defined mass of mixed attenuation within the left nasal cavity. The mass measurements are approximately 10 x 5 x 3 cm. Extensive lysis of the nasal turbinates and adjacent bone is seen. The mass extends across the nasal septum into the right nasal cavity as well as onto the bridge of the nose and close to the left nostril. No intracranial extension is identified at this time. Nonuniform enhancement and intralésional bone production are seen.

The regional lymph nodes present within normal limits.

COMPUTED TOMOGRAPHIC DIAGNOSIS

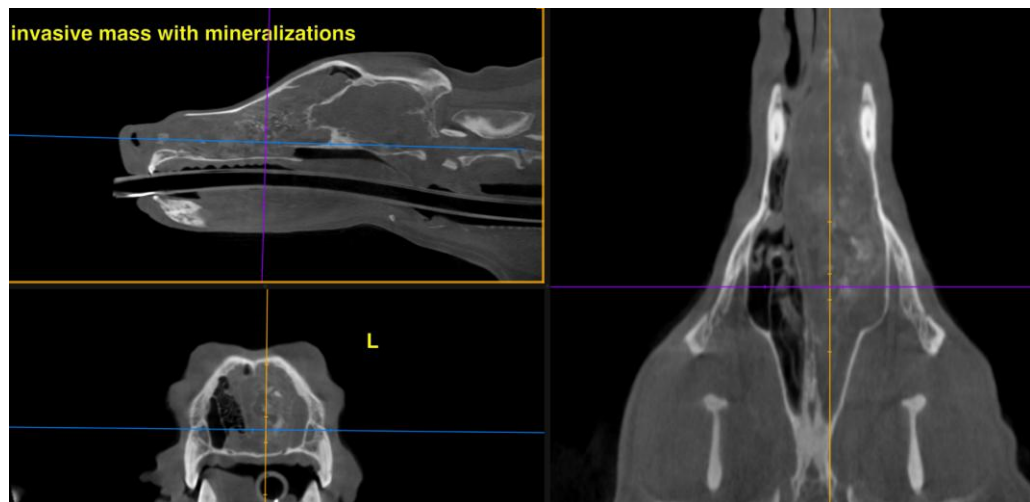
- Extensive aggressive nasal mass compatible with neoplasia in the left nasal cavity – no evidence of intracranial extension or lymph node involvement at this time.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are compatible with a malignant neoplasia in the left nasal cavity with extension onto the bridge of the nose, into the left nostril, and right nasal cavity. Differential diagnosis includes nasal carcinoma as well as chondrosarcoma primarily. The findings are not compatible with a nonneoplastic mass. No evidence of intracranial extension is present at the time.

Evidence of lymph node metastasis is not seen.

Tissue sampling is recommended to confirm tumor type which may be achieved through the left nostril or from the bridge of the nose cranial to the nasal bones.





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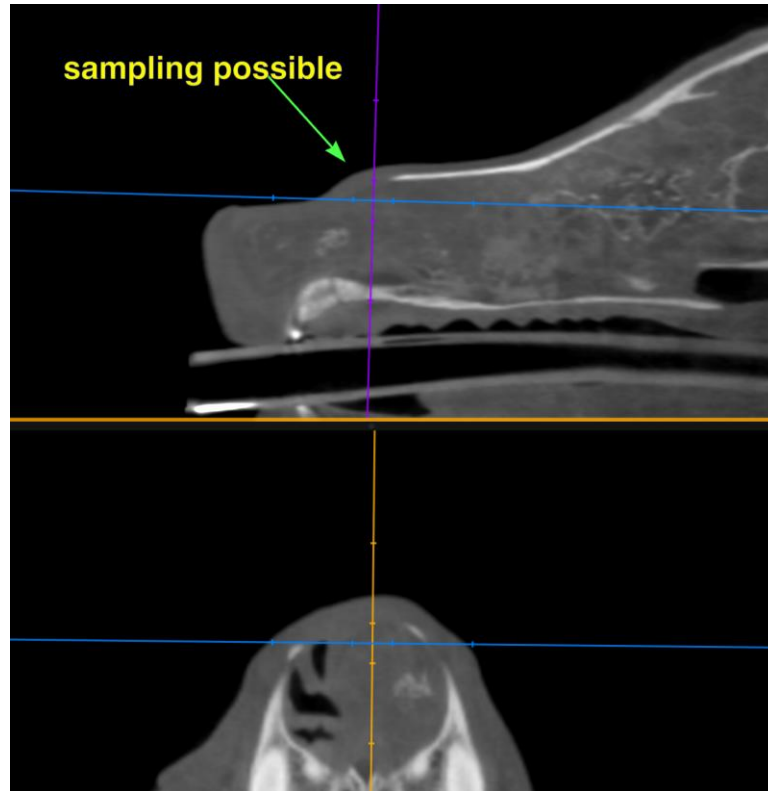
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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