



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT**  
Grace Dods

**SPECIES**  
Canine

**BREED**  
German Shepherd

**SEX**  
FS

**AGE**  
8 Years

**INTERPRETED BY**  
Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**HOSPITAL NAME**  
Southern Oregon  
Veterinary Specialty  
Center

**REFERRING VET**  
Kim Winters

**INVOICE**  
51511

**DATE**  
4-13-22

Grace presents for consultation for possible nasal mass. March 29th Grace presented to her RDVM for a one week history of bloody discolored discharge form the right nostril. She has had a dry nose for some time that was treated with a cream, then she started acting like her nose was sensitive (seems somewhat better since treating the dry nasal planum) and the drops of blood/thick greenish/brown discharge started. Mom had seen some drops of blood for awhile before but couldn't find the source. She does not snore and she does not sneeze or reverse sneeze very often. She also had a strange event either a seizure or feel out of bed the morning of her appointment that though it did not last long was followed by a prolonged period of her walking sideways and acting confused.. 4/1 she blew out a large clot and was having some on and off neurological signs. Overall she is doing ok eating and drinking but she is not playing as much and doesn't want to jump/ She had some labs and a radiograph done at her primary care then was referred over for further imaging. She is on no medications. Adopted 5-6 years ago. She was very thin and had heartworm disease, which was treated. No other recent medical history. No travel history. Some exposure to wildlife.

**COMPUTED TOMOGRAPHIC STUDY OF THE HEAD**

Plain and post contrast studies available for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

The brain presents no deviation from normal anatomy and symmetry. The grey and white matter distinction and the neuroparenchymal attenuation are as expected. The distribution of contrast enhancement is within normal limits throughout the parenchyma and meninges. The ventricular system is non-dilated and within the limits of the expected volume and symmetry.

Asymmetry of the frontal sinuses with medial deviation of the lateral contour of the left frontal sinus is seen. The outline of the frontal sinus, however, appears to be intact. There is no evidence of mucosal swelling, fluid accumulation, or hyperostosis. The osseous lining of the nasal cavities is intact.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external auditory meatuses present within normal limits.

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

The salivary glands present within normal limits.

The visible dentition is within normal limits.



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**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Mild frontal sinus asymmetry.
- No evidence of nasal pathology.
- Structurally normal CT study of the brain.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT study of the nasal cavities is within normal limits. There is no evidence of rhinitis, turbinate destruction, foreign material, or a soft tissue mass.

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The asymmetry of the left frontal sinus may represent congenital malformation. Prior trauma cannot be ruled out. At this time, there is no evidence of inflammation or other structural changes of the frontal sinus. Clinical significance is questionable.

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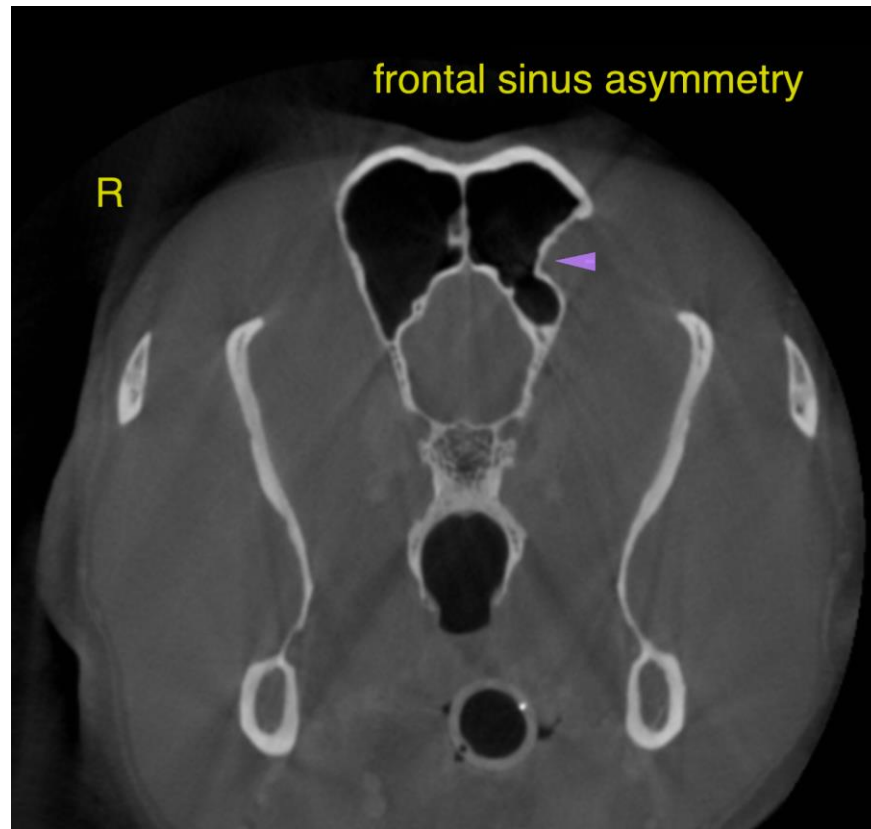
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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