

**PATIENT**

Scooter Moore

PRESENTING CLINICAL SIGNS

intermittent R sided epistaxis, neurologic symptoms

SPECIES

Feline

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies available for review.

BREED

DSH

SEX

MN

AGE

15 Years

COMPUTED TOMOGRAPHIC FINDINGS

An irregular shaped and ill-defined mass of approximately 3.5 x 2 cm is seen within the mid and caudal third of the right nasal cavity. Regional turbinate destruction is noted as well as interruption of the right cribriform plate and aggressive osteolysis of the right nasal, frontal, and maxillary bones. The mass extends into the nasal fundus, cranial vault, and right frontal sinus. A mass effect onto the right frontal lobe of the brain is noted with increased contrast enhancement and regional cerebral midline shift. Extensive turbinate destruction and fluid accumulation as well as calvarial hyperostosis are seen in the right nasal cavity and right frontal sinus.

The right tympanic bulla contains fluid attenuating material, as well as occasional mineralization, and presents thickening of its osseous lining. The left tympanic bulla contains a moderate amount of fluid attenuating material.

The regional lymph nodes present within normal limits.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right sinonasal soft tissue mass with aggressive biological behavior and extension into the cranial vault as well as into the nasal fundus.
- Chronic bilateral otitis media, R>L.

HOSPITAL NAME

Companion Animal
Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are compatible with a malignant right sinonasal soft tissue neoplasia with intracranial extension and extension into the nasal fundus. Differential diagnosis includes lymphosarcoma, nasal adenocarcinoma, other carcinoma, and less likely soft tissue sarcoma. Final diagnosis would require sampling for histology which can be obtained by means of retrograde rhinoscopy.

REFERRING VET

Dr. Wolf

The co-occurring bilateral otitis media is likely unrelated to the sinonasal pathology.

INVOICE

57819

DATE

4-17-23



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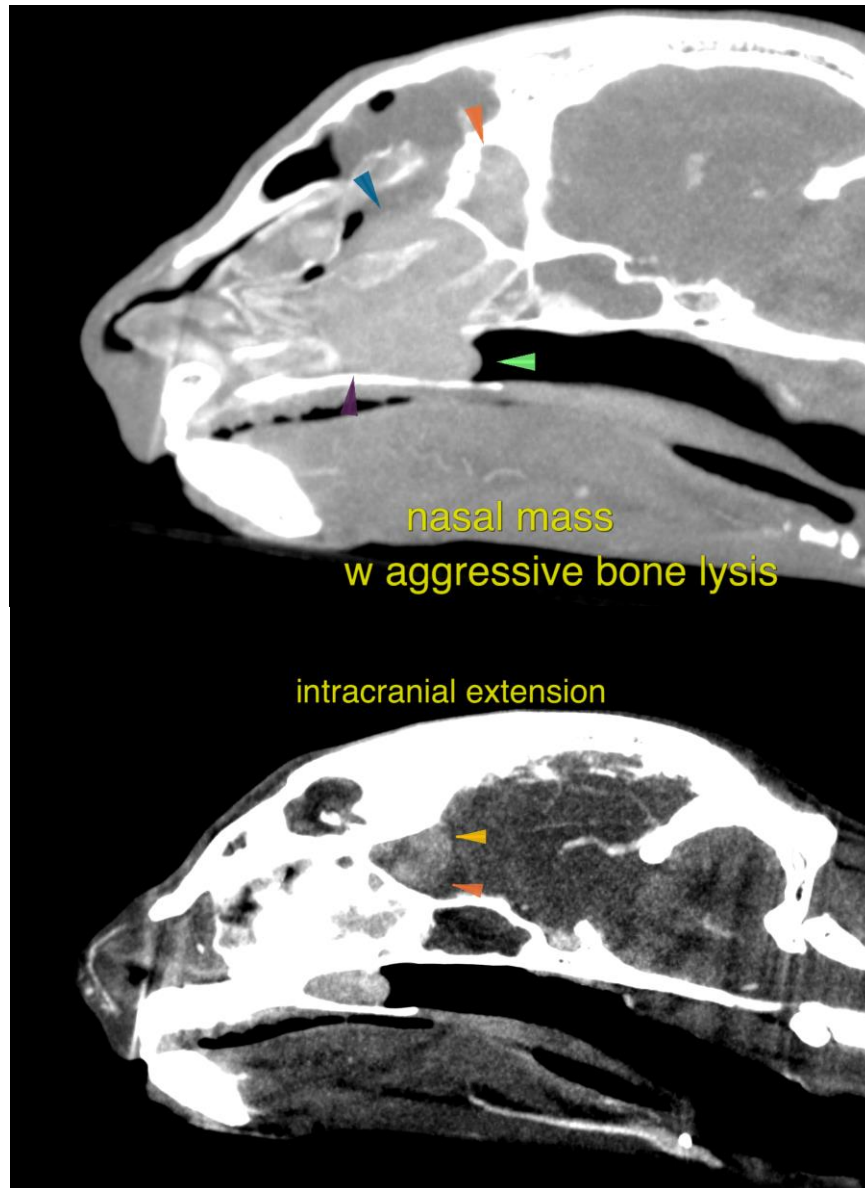
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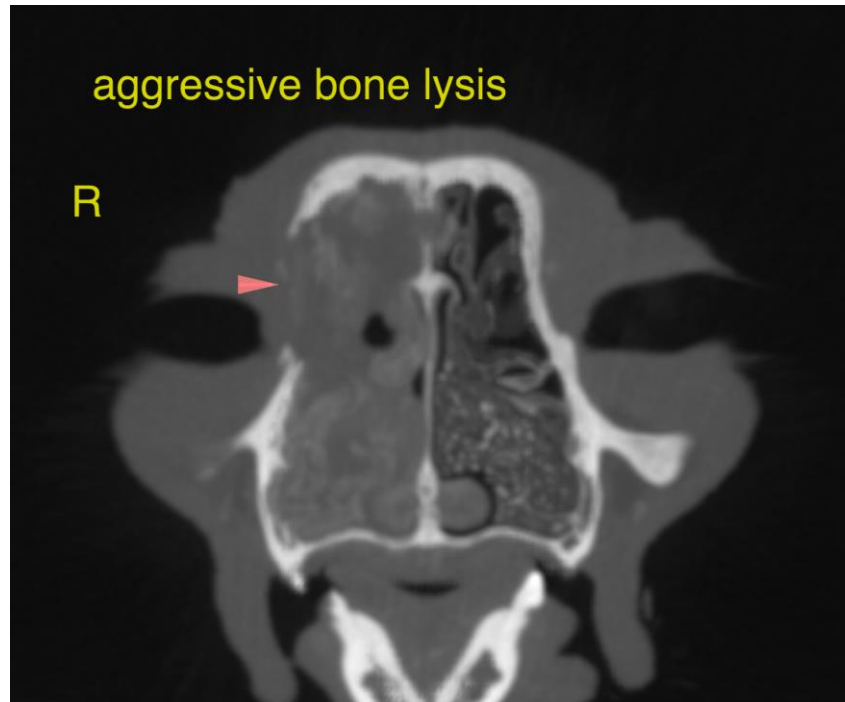
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

HOSPITAL NAME

Companion Animal
Hospital

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Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
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Dr. Wolf

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