



## PATIENT

Lucy Noda

## SPECIES

Canine

## BREED

English Bulldog

## SEX

FS

## AGE

9Y, 2M

## WEIGHT

54.2

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Mobile Pet Imaging

## HOSPITAL NAME

Mobile Pet Imaging

## REFERRING VET

Bogdansky

## INVOICE

74779

## DATE

4-27-26

## PRESENTING CLINICAL SIGNS

6 week duration sneezing unilateral epistaxis .. PPHx-was on doxycycline and Prednisone without resolution of clinical signs

Abnormal PE/Chem/CBC/UA Results: CBC/Chem/coag profile -wnl

## COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies are available for review.

## COMPUTED TOMOGRAPHIC FINDINGS

Moderate bilateral nasal cavity fluid accumulation and diffuse mucosal thickening within the nasal passages is seen. A larger amount of fluid appears to accumulate in the rostral nasal cavities caudal to the stenotic nares. No discrete mass lesion is identified. There is no evidence of aggressive turbinate destruction or bone lysis.

Severe multifocal periodontal disease most pronounced at teeth 209 and 210 is seen. The tooth roots extend dorsally toward the ventral aspect of the left orbit. No definitive oronasal fistula is identified.

Mild bilaterally symmetric submandibular and retropharyngeal lymphadenomegaly is noted.

The upper airway conformation is consistent with brachycephalic obstructive airway syndrome.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Moderate chronic bilateral rhinitis.
- No CT evidence of nasal neoplasia.
- Severe periodontal disease most marked at 209 and 210 with extension of tooth roots toward the left ventral orbita.
- Mild bilateral reactive regional lymphadenopathy.
- Brachycephalic obstructive airway syndrome.

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The findings are most consistent with inflammatory rhinitis which may be multifactorial. The periodontal disease may contribute to regional inflammation and possible referred nasal signs. However, at this time, no dentonasal fistula is overtly seen. There is no CT evidence of aggressive nasal mass. Chronic infectious or inflammatory rhinitis is considered likely based on the CT presentation.

Comprehensive dental evaluation and treatment as well as rhinoscopy with sampling for histopathology and culture and sensitivity is recommended, if not performed already.



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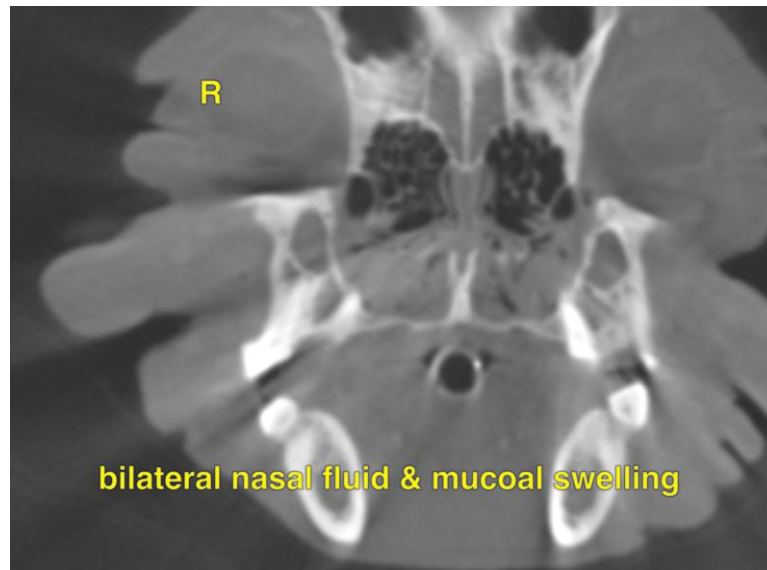
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,  
Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.  
[info@sonopath.com](mailto:info@sonopath.com)