



## PATIENT

Keke Lehr

## SPECIES

Feline

## BREED

DSH

## SEX

FS

## AGE

15Y

## WEIGHT

3.46kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

EH

## HOSPITAL NAME

Crown Veterinary  
Specialists and Associates

## REFERRING VET

Carly Bloom

## INVOICE

74479

## DATE

4-6-26

## PRESENTING CLINICAL SIGNS

- right-sided nasal congestion
- dental disease especially of a right maxillary molar
- a picky appetite
- HCM

Abnormal PE/Chem/CBC/UA Results: Mild, intermittent inspiratory stertor, slightly wet. When left nostril held off and mouth closed, does not move air through R nostril. Has dried yellow discharge at the entrance of the right nostril. Left air flow seems normal. No ocular discharge gingival redness and recession over maxillary right molar with neck exposed, moderate dental tartar II/VI sternal systolic heart murmur,

## COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies are available for review.

## COMPUTED TOMOGRAPHIC FINDINGS

The CT study reveals an irregular shaped and ill-defined approximately 3 x 2 x 1.5 cm sized soft tissue attenuating mass in the right nasal cavity. The mass extends into the nasal fundus and causes obstruction of air flow. Associated destruction of turbinate and osteolysis of surrounding nasal bones is seen. Early lysis of the ventral right cribriform plate is noted. Fluid accumulation is present in the right presphenoid and right frontal sinus.

Mild enlargement of the right submandibular lymph node is noted.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Aggressive right sided nasal mass with early cribriform plate lysis and nasal fundus obstruction.
- Mild right submandibular lymphadenomegaly compatible with reactive change.

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The findings are compatible with a malignant nasal neoplasia with soft tissue and osseous destruction. Differential diagnosis includes nasal carcinoma or lymphoma and less likely fungal rhinitis.

The mild right submandibular lymphadenopathy may represent reactive change and less likely early regional metastasis.

Tissue diagnosis by means of rhinoscopy with biopsy is recommended to confirm the nature of the mass.



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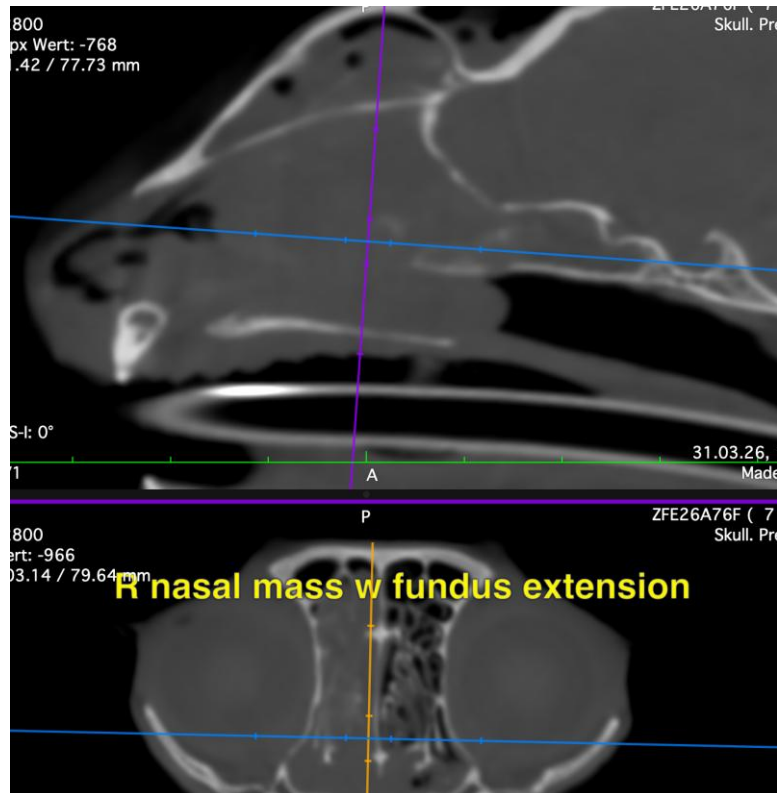
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)