



PATIENT

Hiro Gardiner

SPECIES

Feline

BREED

DSH

SEX

Female

AGE

13Y

WEIGHT

7lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Ralph

HOSPITAL NAME

Animal Clinic of
Queens

REFERRING VET

Dr. Mucera

INVOICE

74503

DATE

4-7-26

PRESENTING CLINICAL SIGNS

- Pt has chronic rhinitis, cloudy discharge.
- Minimal improvement on antibiotics
- Hx of stomatitis

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

An approximately 3 x 2 cm sized, irregular shaped, and ill-defined, soft tissue attenuating mass is present within the right nasal cavity. The mass extends caudally into the nasal fundus with obstruction. Heterogeneous contrast enhancement is noted within the mass. Destruction of nasal turbinates and adjacent bones including nasal, maxillary, palatinal bones, as well as right ventral cribriform plate and pterygoid bone is seen. Extension across the midline into the contralateral nasal cavity is present. Fluid accumulation is seen within the presphenoidal sinus and right frontal sinus.

Mild enlargement of bilateral submandibular and retropharyngeal lymph nodes is noted.

The dentition is incomplete with multiple absent dental elements.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Aggressive nasal mass centered in the right nasal cavity with bilateral extension into the nasal fundus and osseous destruction including early cribriform plate involvement.
- Secondary sinus fluid accumulation.
- Mild regional lymphadenomegaly.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The imaging features are consistent with nasal neoplasia with primary differentials including carcinoma and lymphoma. Severe fungal rhinitis is considered by far less likely given the mass like appearance and aggressive bone destruction. Cribriform plate involvement raises concern for early intracranial extension although definitive intracranial invasion is not clearly demonstrated in this study.

The mild lymphadenomegaly may be reactive or represent early metastatic disease.

Consider tissue sampling for definitive diagnosis as well as FNA of the lymph nodes and thoracic imaging for staging if neoplasia is confirmed.



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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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