



PATIENT

Max Hays

PRESENTING CLINICAL SIGNS

Acute onset of neurological signs, beginning with seizures over the last 3 days. Tested positive for ehrlichia 3 days ago, has been on Doxycycline since 7/23, and Dexamethasone and clindamycin 7/24. Other neuro signs have included twitching, facial nerve deficits, and mentation changes.

SPECIES

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies in soft tissue and bone windows available for review.

BREED

Husky

COMPUTED TOMOGRAPHIC FINDINGS

An approximately 3.5 x 1.5 cm sized soft tissue attenuating mass with heterogeneous contrast enhancement and ill-defined margins is seen in the caudodorsal aspect of the left nasal cavity. Regional turbinate destruction is seen as well as perforation of the cribriform plate which connects to an intraaxial component of the mass within the left olfactory bulb and left frontal lobe of the brain. Moderate heterogeneous contrast enhancement and a mass effect with deviation of the rostral cerebral midline are noted.

SEX

MN

The left medial retropharyngeal lymph node presents mild symmetric enlargement.

AGE

1.5 Years

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Soft tissue mass with aggressive biological behavior in the caudal aspect of the left nasal cavity and left rostral cerebrum.
- Mild lymphadenomegaly of the left medial retropharyngeal lymph node.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are compatible with a malignant neoplasia within the caudal aspect of the left nasal cavity and left rostral cerebrum. Esthesioneuroblastoma and round cell neoplasia are the most likely differential diagnoses based on the CT presentation and location of the mass. Nasal adenocarcinoma, other carcinoma, and soft tissue sarcoma cannot be ruled out entirely but are thought less likely. The findings are unfortunately not compatible with an inflammatory process. Final diagnosis will require sampling for histology.

HOSPITAL NAME

Bluegrass Veterinary
Specialists

REFERRING VET

Radhakrishnan

The lymph node changes suggest reactive hyperplasia. Early metastatic disease is thought unlikely. Fine needle aspiration is recommended for further definition.

INVOICE

53052

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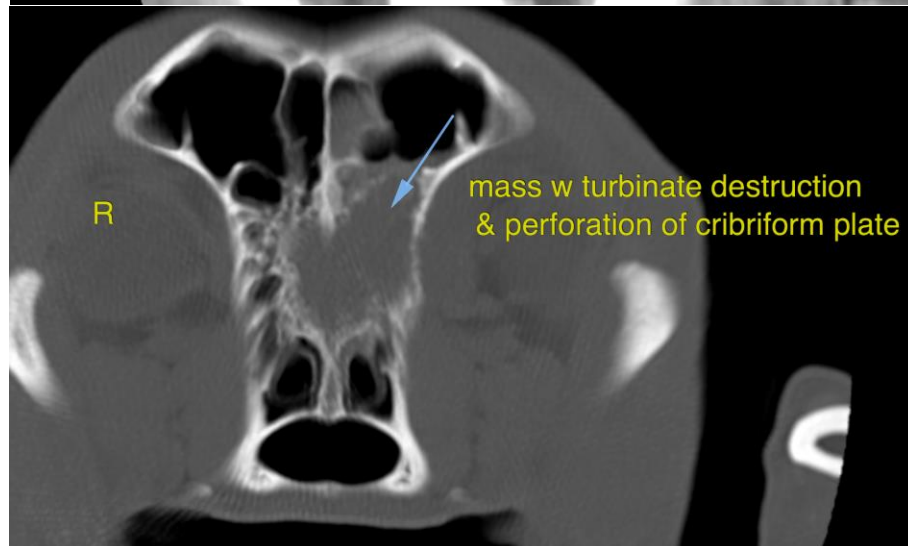
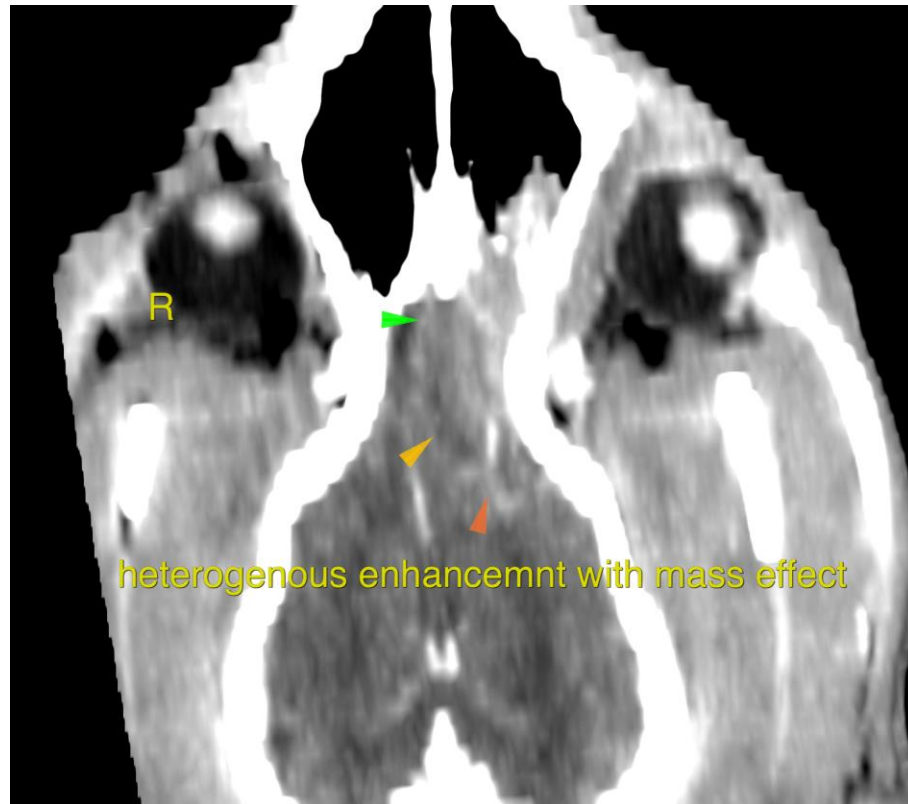
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

SPECIES

Canine

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