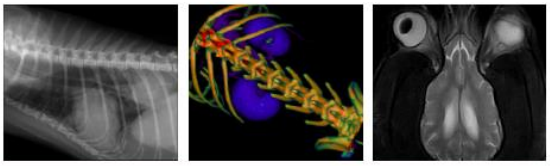

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1-800-838-4268 info@sonopath.com

PATIENT

Callie Carlson

SPECIES

Canine

BREED

Husky Mix

SEX

Spayed Female

AGE

5 Years

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Aloha Pet & Bird Hospital

REFERRING VET

Dr. J. Pepen

INVOICE

59584

DATE

7-31-23

PRESENTING CLINICAL SIGNS

Chronic blood from right nose mass at top of head.

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & THORAX

Plain study of the thorax and plain and post contrast studies of the head are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

Head

An irregular shaped and ill-defined soft tissue attenuating mass is seen in the caudal aspect of both nasal cavities in a midline position. The mass is measuring approximately 6 cm in length, 4.5 cm in height, and 3.5 cm in width. Lesion margins are ill-defined. Contrast enhancement is nonuniform and moderate. Polyostotic aggressive bone lysis and regional turbinate lysis are noted involving the bilateral frontal, nasal, maxillary bones, cribriform plate, as well as the nasal septum and do allow for extension of the mass onto the dorsum of the nose in the nasal frontal region as well as extension intracranial extension with a mass effect onto the bilateral olfactory bulbs and frontal lobes. Focal mineralization is seen within the mass level with the cribriform plate. A mild amount of fluid is accumulating in the right nasal cavity rostral of the mass. Bilateral frontal sinus fluid accumulation is noted.

The regional lymph nodes present within normal limits.

Thorax

The bony and surrounding soft tissue structures are within normal limits.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior.

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large nasal mass with polyostotic aggressive bone lysis and intracranial extension as well as extension onto the dorsum of the nose.
- No evidence of metastatic disease to the regional lymph nodes or lung.

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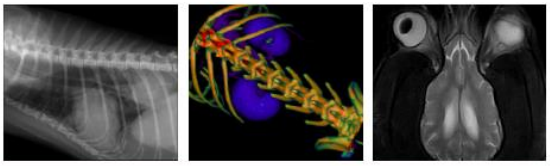

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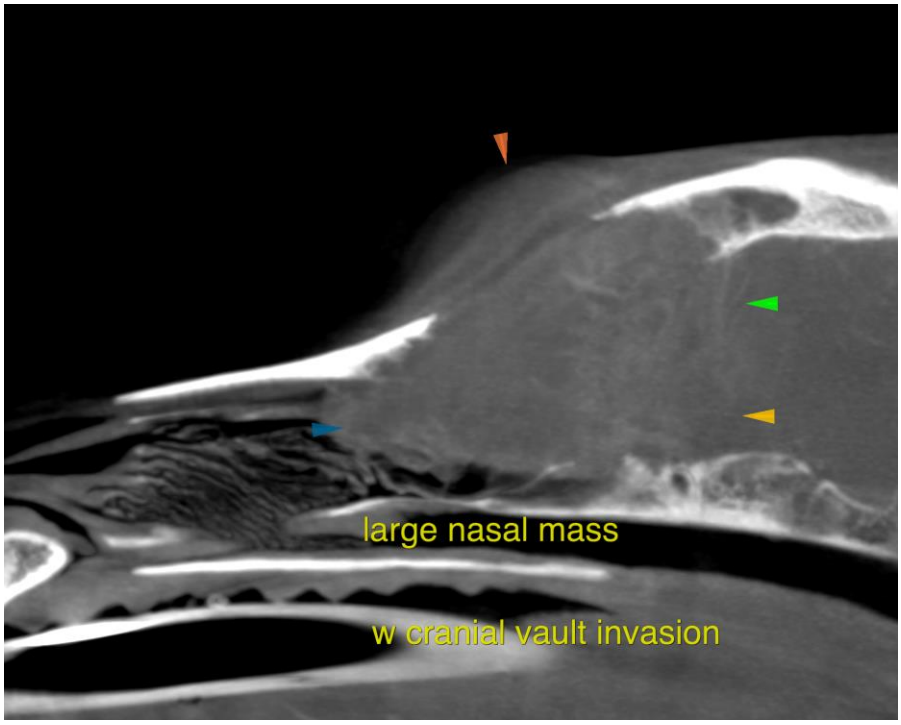
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study reveals a mass with aggressive biological behavior. Malignant soft tissue neoplasia such as nasal adenocarcinoma is considered likely. Lymphosarcoma, soft tissue sarcoma, and esthesioneuroblastoma are considered less likely differential diagnoses. Final diagnosis will require sampling for histology. Note the extensive growth of the tumor with intracranial distribution and mass effect onto the cerebral hemisphere.



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.

Nele Eley, DVM, Dr. med. vet., DipECVDI
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