



**PATIENT**

Rydr Dean

**SPECIES**

Canine

**BREED**

Shetland Sheepdog

**SEX**

Male

**AGE**

8 Years, 11 Months

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

**HOSPITAL NAME**

Wilson Veterinary  
Hospital

**REFERRING VET**

Dr. Hooser

**INVOICE**

53255

**DATE**

8-3-22

**PRESENTING CLINICAL SIGNS**

Pet presented for recent onset of intermittent left sided epistaxis. Referring veterinarian took skull radiographs showing increased soft tissue/fluid opacity within the left nasal cavity. Abnormal PE/Chem/CBC/UA Results: No significant abnormalities, blood pressure 130-135 mmhg

**COMPUTED TOMOGRAPHIC STUDY OF THE HEAD**

Plain and post contrast studies available for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

An irregular shaped ill-defined soft tissue attenuating mass is seen within the dorsal nasal meatus of the left nasal cavity. The mass starts approximately 5.0 cm caudal to the entrance of the nares and measures approximately 2.0 cm in length and 1.5 cm in diameter. Lesion margins are ill-defined. The overlying nasal bone presents focal defects. There is regional turbinate destruction and a regional mass effect. The mass presents moderate nonuniform contrast enhancement. The remainder of the left nasal cavity presents within normal limits. The cribriform plate is intact. The right nasal cavity presents within normal limits.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Soft tissue mass with aggressive biological behavior in the dorsal aspect and mid third of the left nasal cavity.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT study suggests presence of a soft tissue neoplasia with aggressive biological behavior within the left nasal cavity. Fungal or other granuloma is thought unlikely as a differential diagnosis. Final diagnosis will require sampling for histology. Primary differential diagnosis includes nasal adenocarcinoma, other carcinoma, lymphosarcoma, and soft tissue sarcoma.



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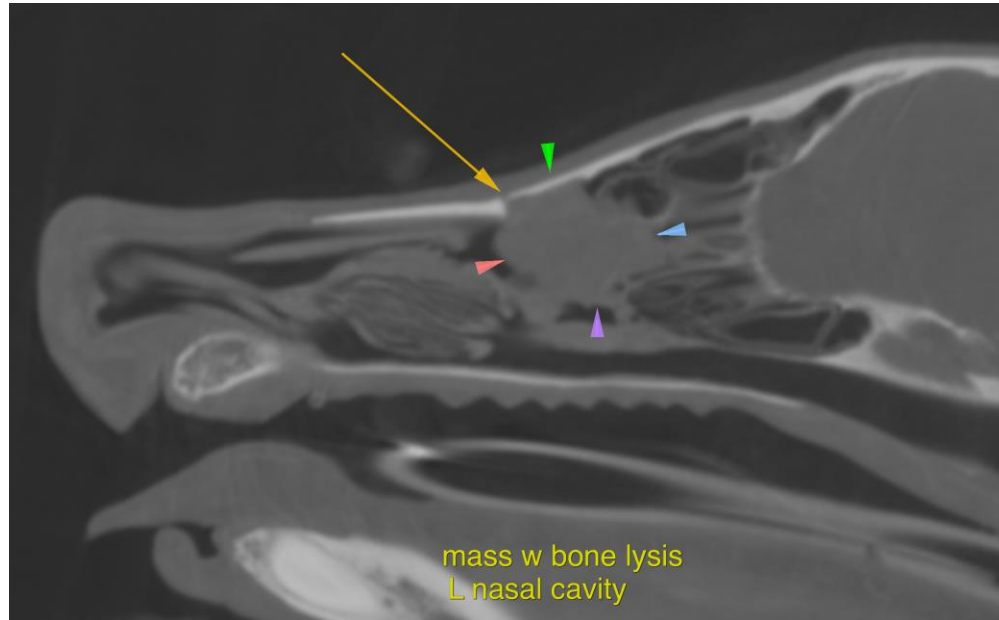
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Nele Eley**, DVM, Dr. med. vet., DipECVDI  
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,  
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology  
Nele.Eley@sonopath.com