



PATIENT

Dougie #9059AA-CT
Byers

SPECIES

Canine

BREED

Boxer

SEX

F

AGE

9 Years, 6 Months

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

HOSPITAL NAME

Gentle Doctor Animal
Hospitals

REFERRING VET

Pete Bashara, DVM

INVOICE

59647

DATE

8-3-23

PRESENTING CLINICAL SIGNS

Prior suspect diagnosis of dental abscess/neoplasia with extractions resulting in improved signs of developing rhinitis - post antibiotics and healing, symptoms have returned at or above previous levels including mucoïd to mucoïd hemorrhagic unilateral nasal discharge. History also included 1 year prior OHE with diagnosed ovarian carcinoma - current chest films reported as clear
Abnormal PE/Chem/CBC/UA Results: RDVM labs with normal Chem/CBC and PT/PTT

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies available for review.

COMPUTED TOMOGRAPHIC FINDINGS

The patient has a history of prior dental extractions and rhinitis with abscess.

Triadan 104 has been removed and the dental alveolus of the triadan 104 is filled with uniformly textured bone tissue.

There is a large defect within the alveolar crest and adjacent hard palate in the right maxilla centering the triadans 106 and 107 creating an open connection between oral and nasal cavities. Maxillary bone loss is noted as well. The transition zone to the unaffected bone is of moderate length. Peripheral sclerosis is noted.

The turbinates within the right nasal cavity present regional destruction associated with the dental nasal fistula and circumscribed by regional mucosal swelling. Multifocal moderate turbinate destruction is noted throughout the remainder of the right nasal cavity.

The left nasal cavity and bilateral frontal sinuses present within normal limits.

A discrete soft tissue mass is not seen.

Periodontal disease of the triadan 109 associated with its mesial palatal root as well as of the triadans 207, 301, and 302 is seen.

The right submandibular lymph nodes are mildly enlarged. The remainder of the lymph nodes present within normal limits.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Regional osteopathy of the right maxilla and hard palate with large osseous defect centering the triadans 106 and 107.
- Destructive rhinitis of the right nasal cavity.
- Mild right submandibular lymphadenomegaly.
- Periodontitis of the triadans 109, 207, 301, & 302.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Chronic osteitis with bone atrophy / necrosis is a primary differential diagnosis based on the CT presentation of the defect associated with the maxilla and hard palate centering the triadans 106 and 107.



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The findings within the right nasal cavity support the presence of destructive rhinitis with multifocal turbinate necrosis. Nevertheless, atypical presentation of neoplasia such as squamous cell carcinoma, fibrosarcoma, or metastases cannot be ruled out entirely despite being considered less likely. Final diagnosis will require sampling which is recommended if not performed already.

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The lymph node enlargement of the right submandibular lymph node is mild and suggests reactive hyperplasia rather than metastatic disease. Consider FNA for further definition.

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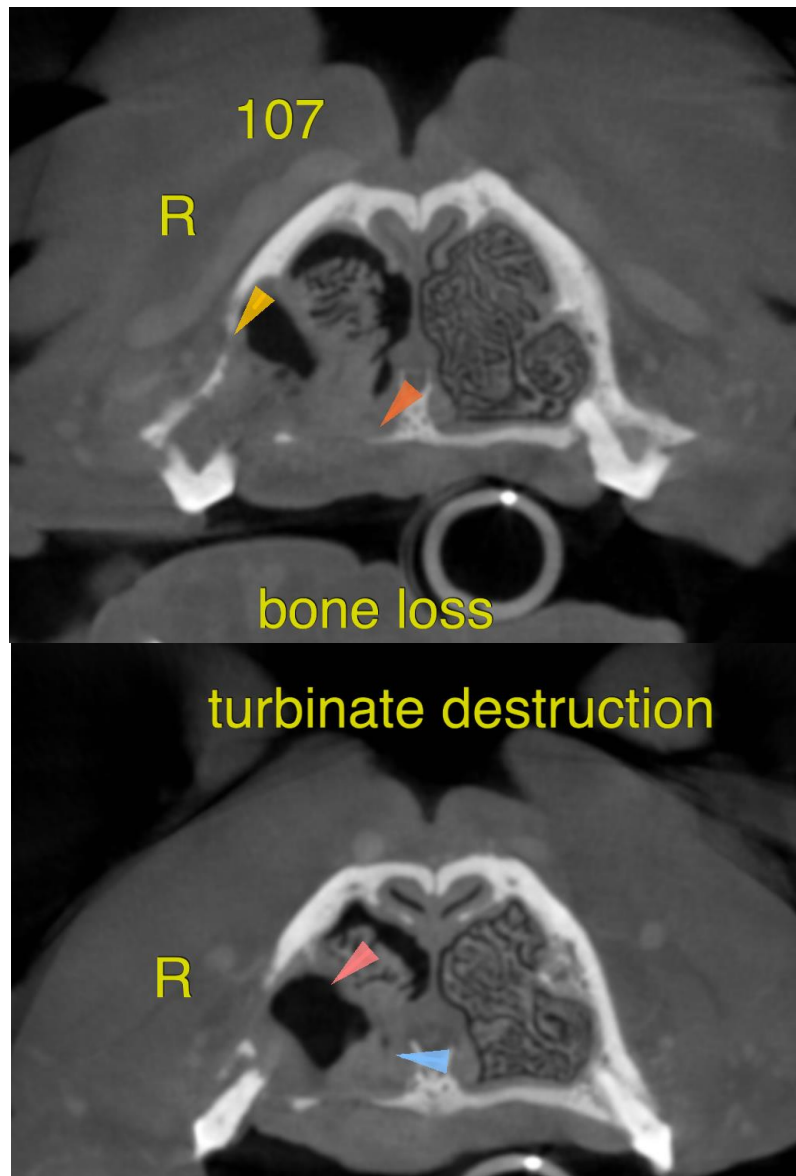
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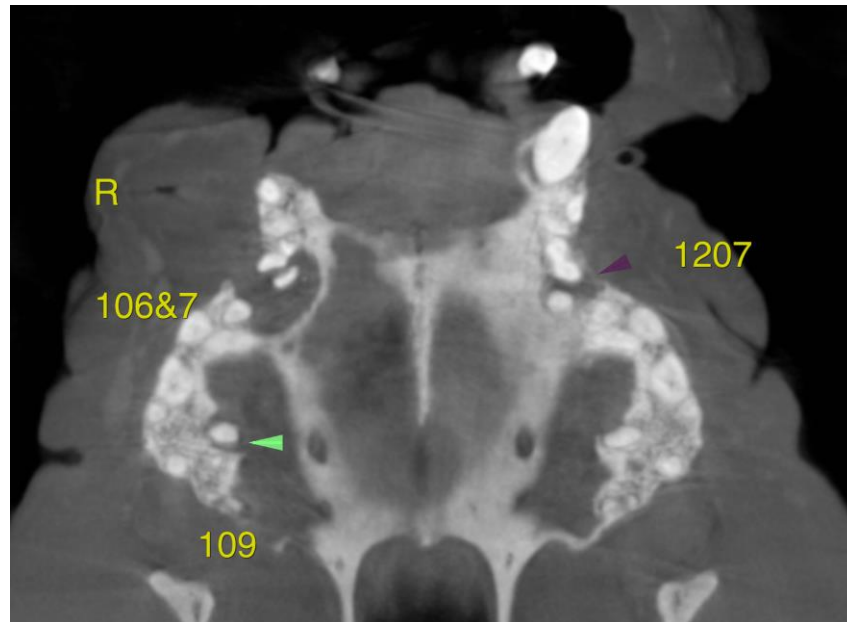
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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