



PATIENT

Captain Intergrative VT

SPECIES

Canine

BREED

Golden Retriever

SEX

MI

AGE

3

WEIGHT

32

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet Specialist
in Diagnostic Imaging

IMAGING PERFORMED BY

David

HOSPITAL NAME

Animal Surgical Center
- Oceanside

REFERRING VET

Inferuso

INVOICE

74321

DATE

3-24-26

PRESENTING CLINICAL SIGNS

swelling on head and painfull when yawning

COMPUTED TOMOGRAPHY OF THE HEAD

Plain study provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

The left frontal sinus shows an expansile lesion of at least 4 cm in the rostro-caudal diameter, showing a mixed pattern of osteolytic and osteoproliferative changes with a lesional center at the level of the frontal sinus. The mass enters the cranial vault with marked osteolysis of the cribriform plate and the laminae of the sinus, crossing the midline to the right and reaching the subcutaneous region dorsal to the sinus.

There is marked impression of the left olfactory bulb noted. The neurocranium is inconspicuous apart from that and as far as can be assessed in the plain study. Both nasal cavities present a deviation of the nasal septum to the right with swollen mucous membranes on the right and in the ventral parts of both nasal cavities.

The displayed dental structures are inconspicuous. The cervical lymph nodes are mildly enlarged on both sides. The soft tissues of the head and neck do not show particular findings apart from that.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Moderately aggressive lesion left frontal sinus entering the subcutaneous region and the cranial vault
- Mild cervical lymphadenomegaly

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT findings do match with an aggressive lesion as seen with neoplastic and chronic inflammatory changes with the frontal sinus being the center of the lesion. Differentials include hyperplastic changes of the mucous membranes with polyp formation and secondary inflammation/infection (mycosis) that lead to perifocal osteolysis of the adjacent bony structures.

Malignant neoplasia cannot be fully excluded and is less likely with regard to the patient's age. Biopsy and histopathology are needed for further differentiation. The destruction of the sinusoidal lamina and the cribriform plate is considered to be of bad prognosis. Secondary meningitis/meningoencephalitis and concomitant neurologic deficits are possible.



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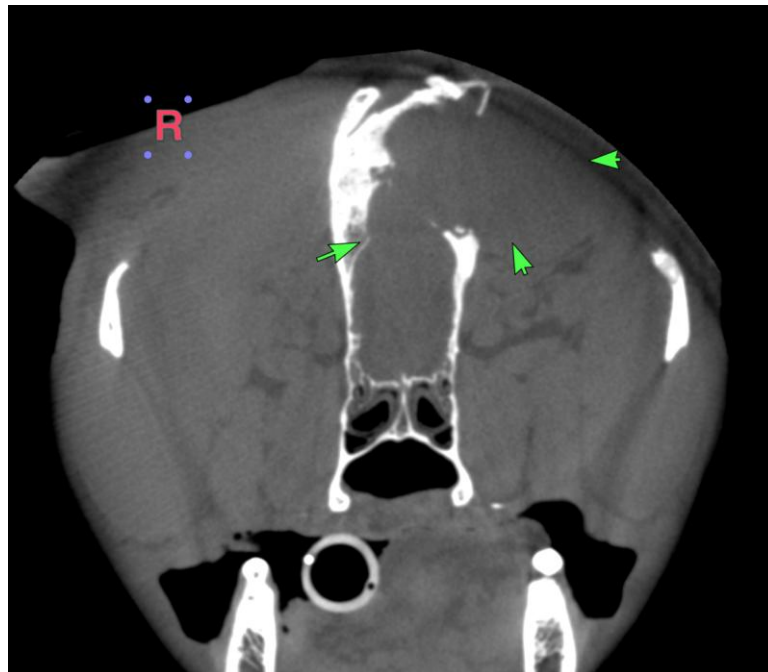
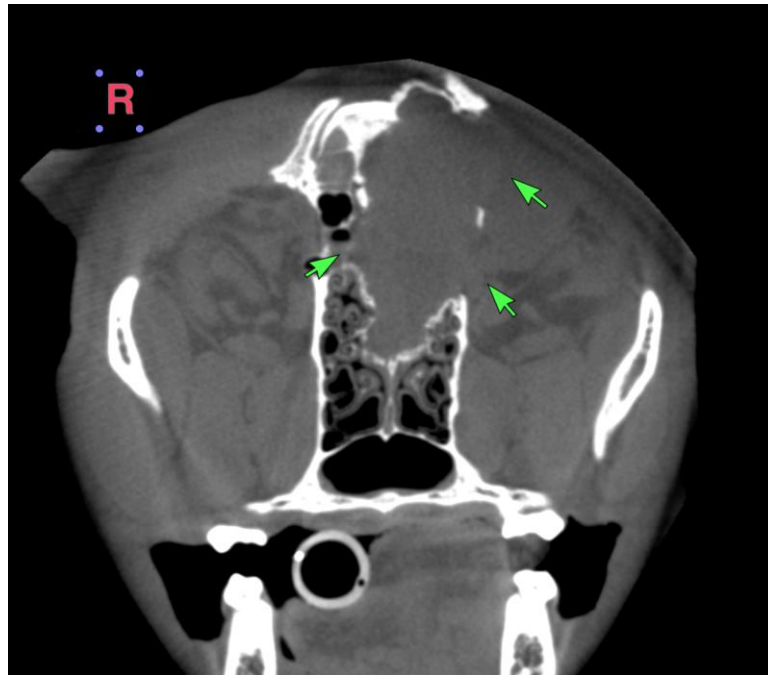
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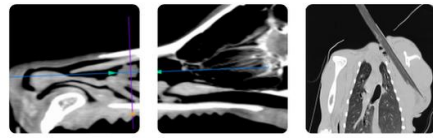
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Teleradiology

Educational Teleconsultation Services™

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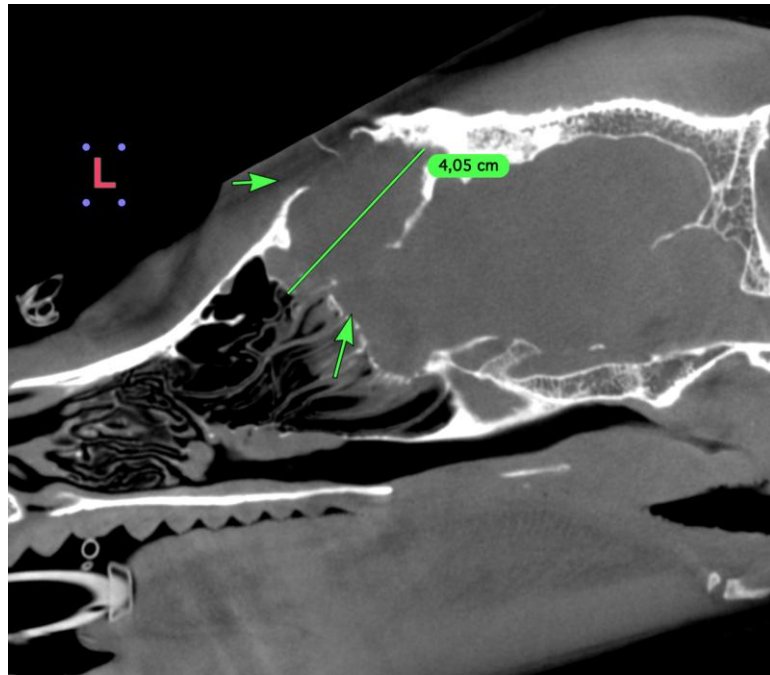
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
info@sonopath.com