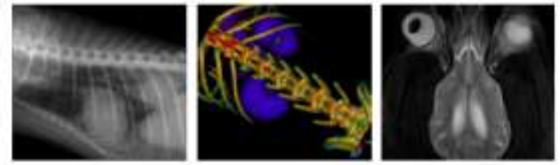
SonoPath Teleradiology
EDUCATIONAL TELECONSULTATION SERVICES™



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

PATIENT

Mickey Rojas

SPECIES

Canine

BREED

Shih Tzu

SEX

M

AGE

14 Years

INTERPRETED BY

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging

HOSPITAL NAME

Veterinary Image Center

REFERRING VET

Dr. L. Buitrago

INVOICE

47201

DATE

8-30-21

PRESENTING CLINICAL SIGNS

Referring diagnosis: Rhinitis/ Sinusitis. Medication: Doxycyclin tab 20 mg 2 tab SID Mickey was referred by Dr. Ramirez on June 22, 2021, since when he cleaned his teeth, he noticed an oronasal fistula. Mickey was being examined mainly for nasal mucous secretions and Dr Ramirez thought that the fistula was his nasal problem. On July 26, 2021, the COHAT was performed with us, we found multiple `` Root tips '' on both sides of the maxilla. Just as the fistula on the right side was worked on. Then on August 16, he returned to perform the second part of the COHAT, which was extracted all the "root tips" on the left side. The canine was removed and the fistula on the right side was closed. Mickey has improved from the nasal secretions on the right side, but not on the left side. He was on clavamox before being referred, urinary diet and prednisone 5mg sometimes for allergic dermatitis
Abnormal PE/Chem/CBC/UA Results: RBC: 5.47 MCHC: 30.8 WBC: 21.94 MON: 0.15 NEU: 19.02 PLT: 553

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Pre/post contrast studies provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

The neurocranium shows normal finding. There is a marked brachycephalic head formation noted. Multiple subcutaneous calcifications and mineralization of the sclera of the right eye are recognized (age- and breed related). The left eye bulb is missing.

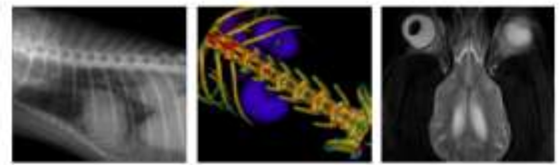
Bony structures of skull and the skull foramina of the cranial nerves are laterally symmetrical and inconspicuous.

Both tympanic bullae present fluid-dense filling more obvious on the left, tympanic bulla walls are inconspicuous. External ear canals are ventilated in all sections, walls of the external ear canals, the adjacent temporomandibular joints and the nasopharyngeal meatus have no particular findings.

A residual left frontal sinus is indicated, the right one is absent.

Nasal cavities severe lytic changes involving the nasal septum, the conches on both sides and the palatine und maxillary bone especially on the left side revealing a large oronasal fistula at the level of the canine. A residual palatal root (208/209?) is detected.

Post contrast images show no pathological enhancement. The right medial retropharyngeal lymph node is mildly enlarged.



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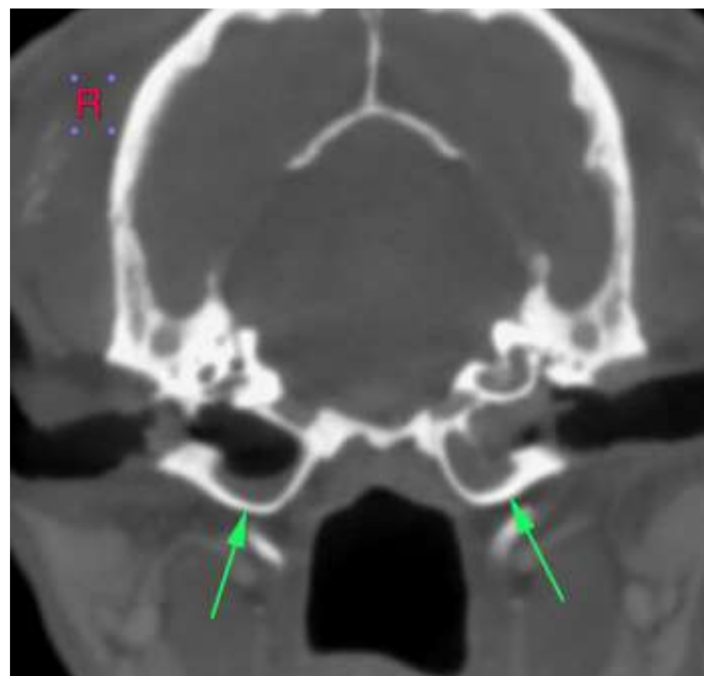
COMPUTED TOMOGRAPHIC DIAGNOSIS

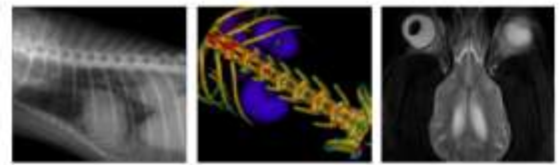
- Severe multifocal osteolysis of the alveolar maxillary and nasal bone
- Oronasal fistula on the left with significant lysis of the palatine and maxillary bone at the level of 204 with marked soft tissue swelling
- Severe destruction of the conches and the nasal septum
- Residual palatal root (208/209?)
- Signs of a bilateral otitis media
- Mild right-sided retropharyngeal lymphadenopathy (reactive-inflammatory)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT findings are severe and do match with recurrent left sided symptoms. The significant lysis and the oronasal fistula may have been triggered by a root abscess (for example of 204), but morphology of the lysis and soft tissue swelling are also commonly seen with neoplasia such as malignant melanoma or squamous cell carcinoma. These should be ruled out with biopsy.

Nasal changes apart from that are representing severe, bilateral and chronic-erosive rhinitis. I assume that curative treatment is not possible. The residual root of 208/209 is non-reactive from a CT perspective. The bilateral otitis media likely is due to insufficient mucous clearance and must be correlated with the clinical presentation.





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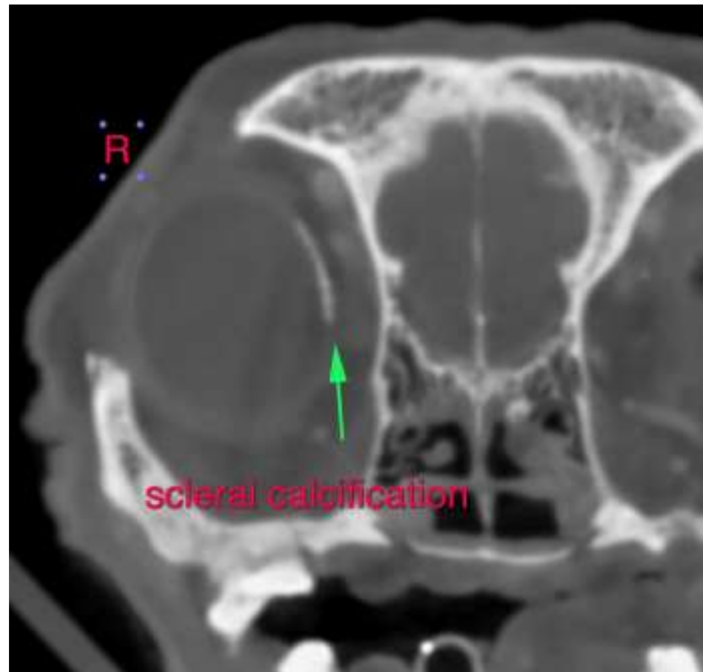

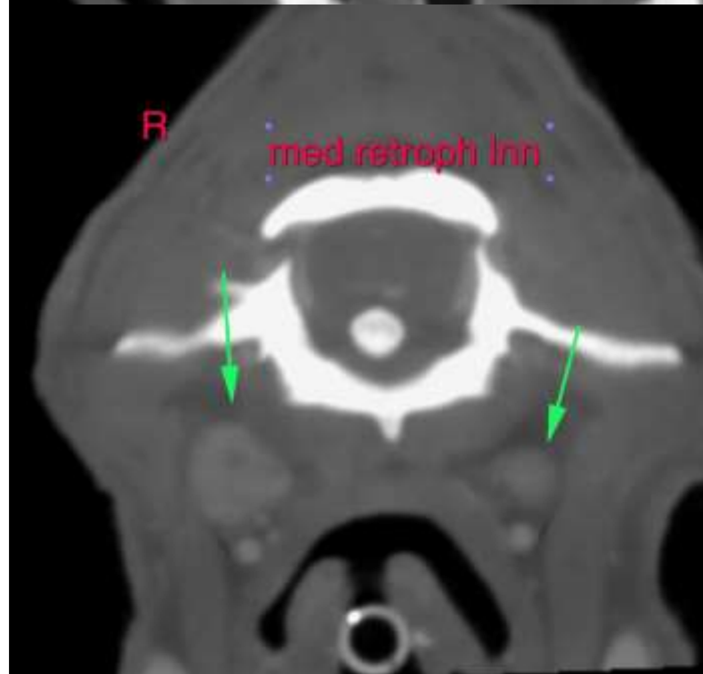

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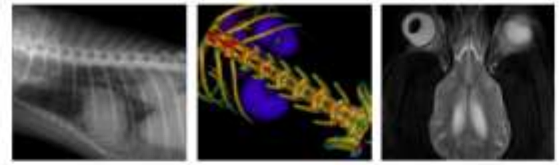

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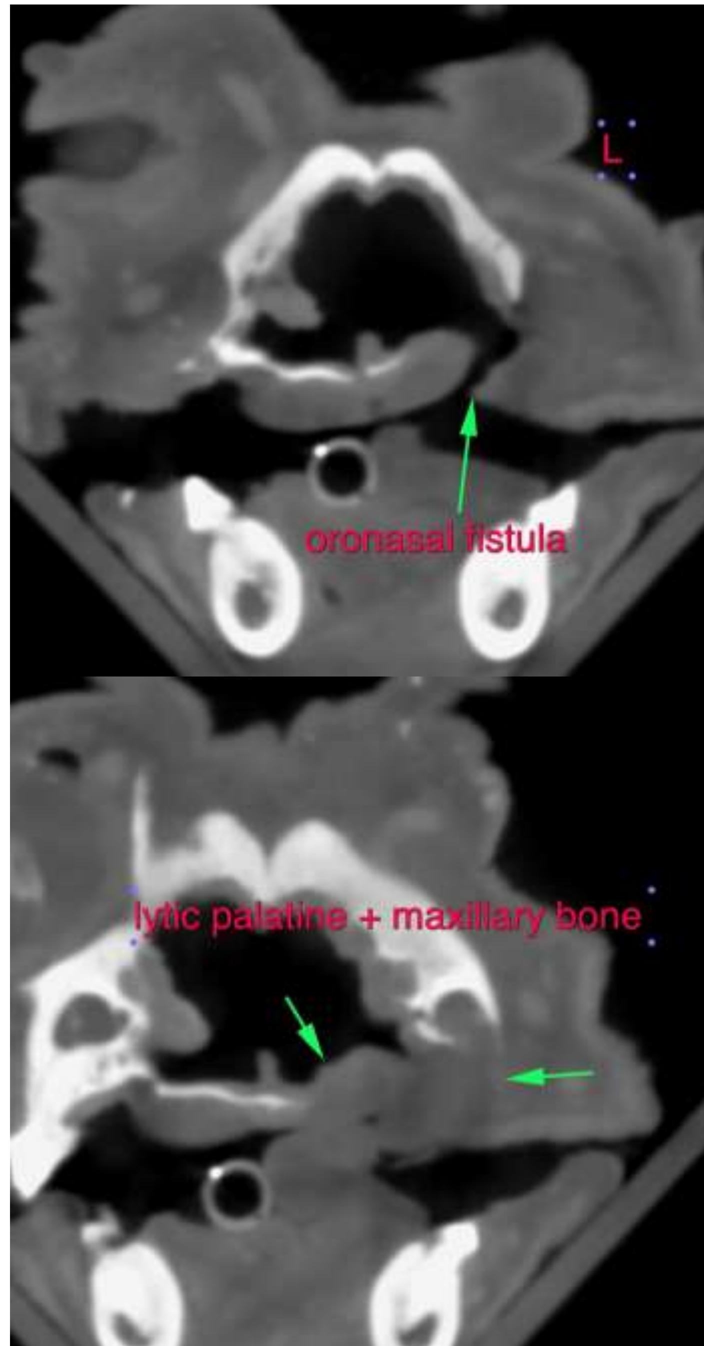

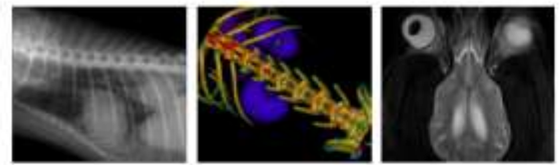

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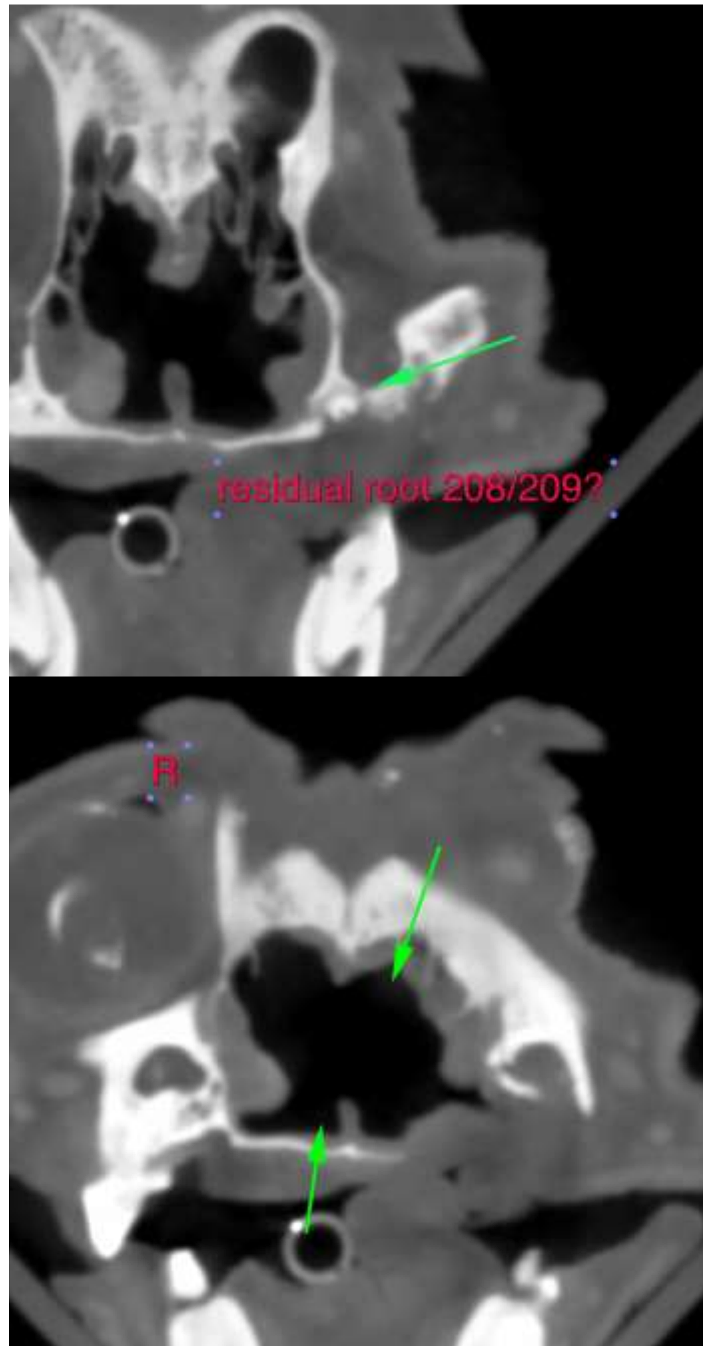

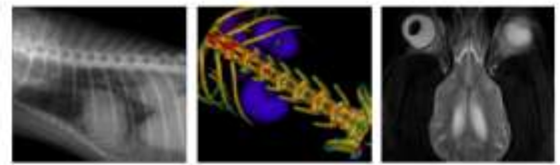

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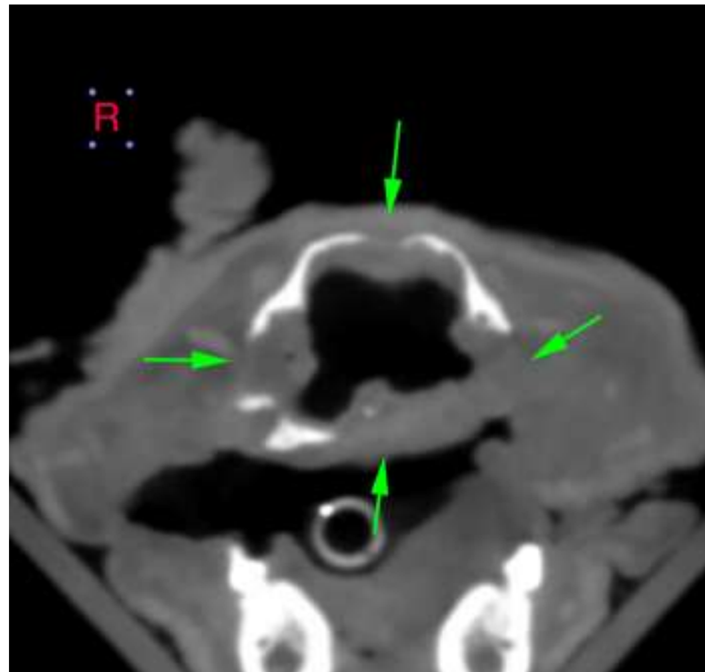

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
Sebastian.Jawinski@sonopath.com