



PATIENT PRESENTING CLINICAL SIGNS

Waldo Pino month sneezing, intermittent nasal discharge and intermittent pistaxis

COMPUTED TOMOGRAPHY OF THE SKULL

SPECIES A high resolution pre- and post-contrast CT study of the skull including the neck is provided for review.

Canine

COMPUTED TOMOGRAPHIC FINDINGS

BREED The pictured parts of the dentition are complete and unremarkable in all jaw quadrants.

Mixed The left nasal cavity is obliterated by a soft tissue attenuating and heterogeneous contrast enhancing mass. Advanced destruction of the left nasal conchal & turbinate structures is appreciated. The left maxillary and palatine bone present multifocal moth eaten osteolytic lesions with perforation of the horizontal and perpendicular plate of the left palatine bone. The cribriform plate presents osteolytic lesions perforating the cranial fossa.

SEX MN Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

AGE Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals are within normal limits.

6 The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The left mandibular and medial retropharyngeal lymph nodes are prominent.

COMPUTED TOMOGRAPHIC DIAGNOSIS

HOSPITAL NAME

Holy Family
Veterinary Hospital

- Primary left nasal soft tissue neoplasia with polyostotic aggressive osteolytic lesions and perforation of the cranial fossa
- Lymphadenopathy left mandibular and medial retropharyngeal lymph nodes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Dr. Willett

The left nasal soft tissue mass is consistent with primary nasal neoplasia with osteolysis of the surrounding osseous structures and perforation of the cranial fossa. Differentials include adenocarcinoma, squamous cell carcinoma, transitional cell carcinoma, lymphosarcoma, other. Rhinoscopy including biopsy can be used as advanced diagnostic tests. Based on the results of the advanced diagnostic tests, the chances of radiation therapy can be discussed with oncologist. The Adam tumor stage is T4.

INVOICE

56311

Recommend FNA sampling of the ipsilateral mandibular and medial retropharyngeal lymph node to check for potential metastatic disease. Consider full tumor staging.

DATE

1-23-23



PATIENT

Waldo Pino

SPECIES

Canine

BREED

Mixed

SEX

MN

AGE

6

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Holy Family
Veterinary Hospital

REFERRING VET

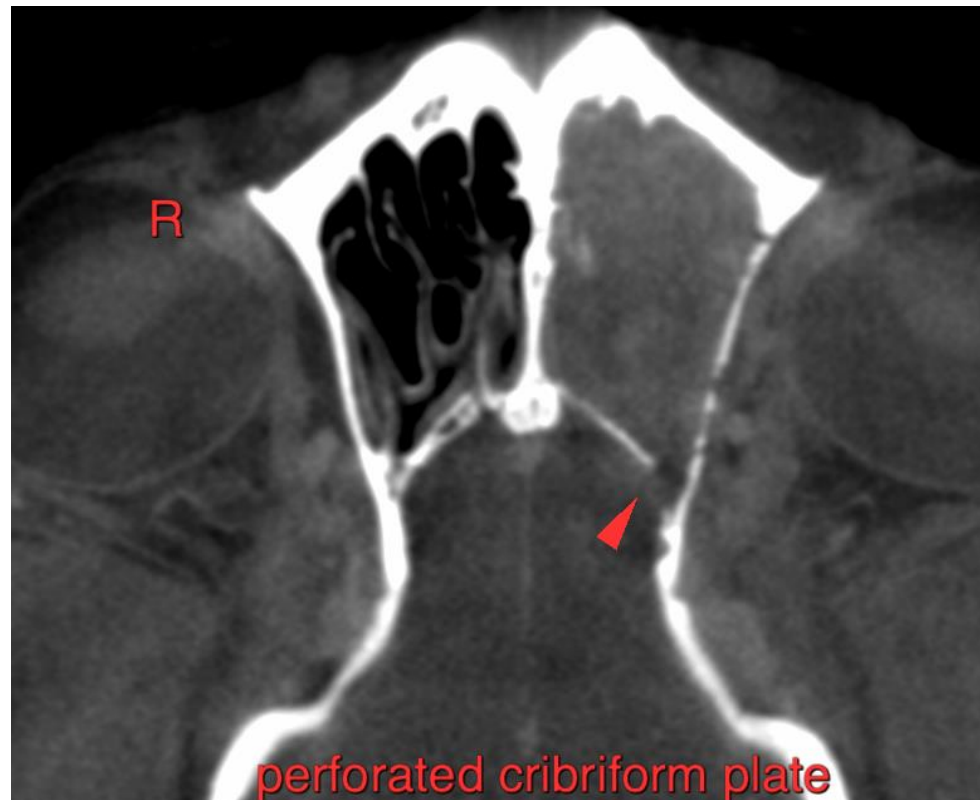
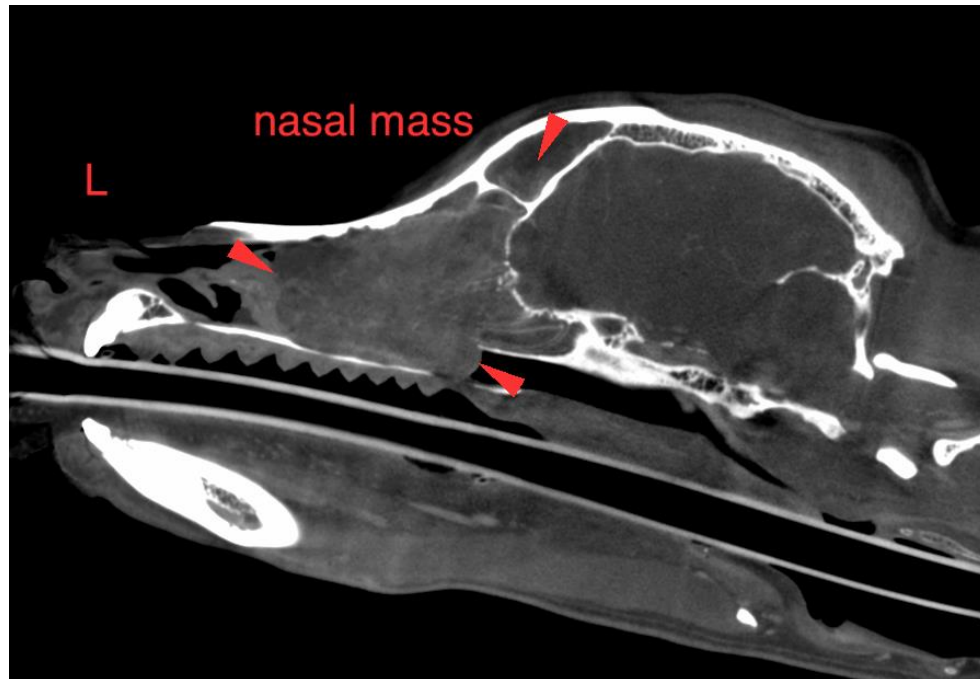
Dr. Willett

INVOICE

56311

DATE

1-23-23





PATIENT

Waldo Pino

SPECIES

Canine

BREED

Mixed

SEX

MN

AGE

6

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Holy Family
Veterinary Hospital

REFERRING VET

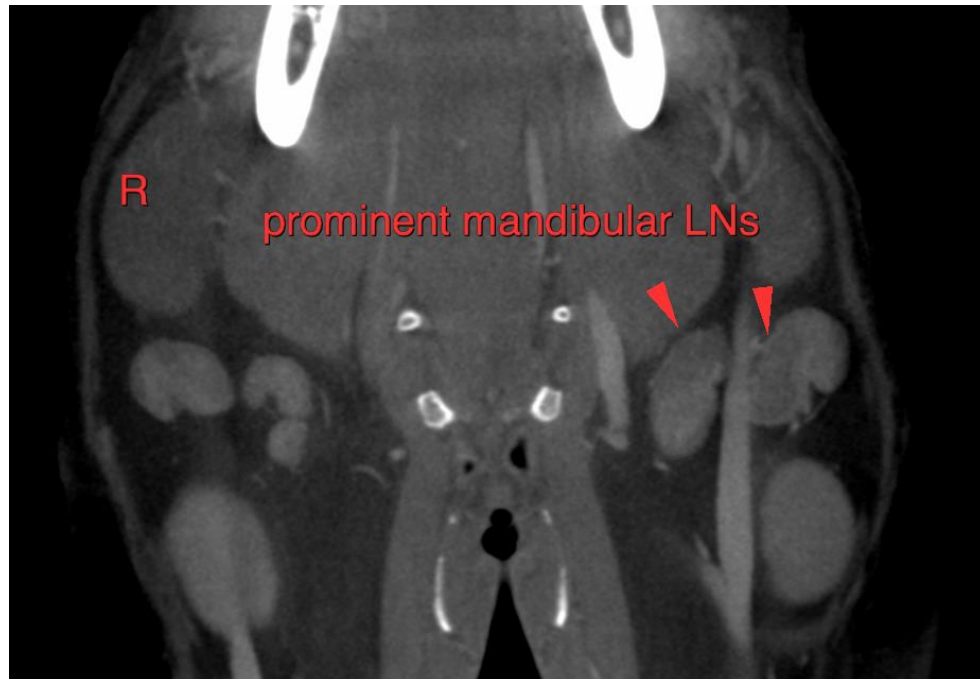
Dr. Willett

INVOICE

56311

DATE

1-23-23



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 Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
sebast.schaub@gmail.com