



PATIENT

Jackie Escalera

SPECIES

Canine

BREED

Great Pyrenees

SEX

Female

AGE

6Y

WEIGHT

70lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Robert

HOSPITAL NAME

Aloha Pet & Bird
Hospital

REFERRING VET

Dr. Pepen

INVOICE

73447

DATE

1-26-26

PRESENTING CLINICAL SIGNS

History:

- 1 month history of epistaxis and facial deformities

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

A high resolution post-contrast CT study of the skull and thorax is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Skull

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

The right nasal cavity is obliterated nasal cavity is obliterated expansile, heterogeneous contrast enhancing soft tissue material. Destruction of the associated nasal conchal structures is seen. The osseous lining of the right nasal cavity presents multifocal permeative osteolysis and is perforated – the right nasal soft tissue material is protruding into the submucosa of the hard palate, subcutaneous tissue and right orbital cavity-the right ocular bulb is deviated rostrolaterally by the mass effect. The right dorsal aspect of the cribriform plate is perforated, and the right nasal mass is mildly bulging into the rostral cranial fossa. The nasal septum is perforated, and the left nasal cavity is partially occupied by the right nasal expansile soft tissue material.

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

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.

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.

The right parotid lymph node and the right mandibular lymph nodes are moderately prominent.

Thorax

The bony and surrounding soft tissue structures are within normal limits.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior.

Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.



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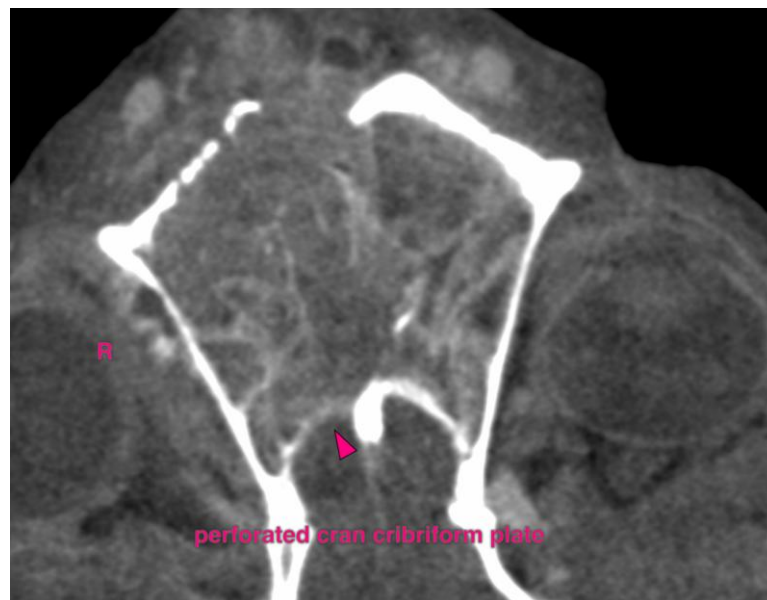
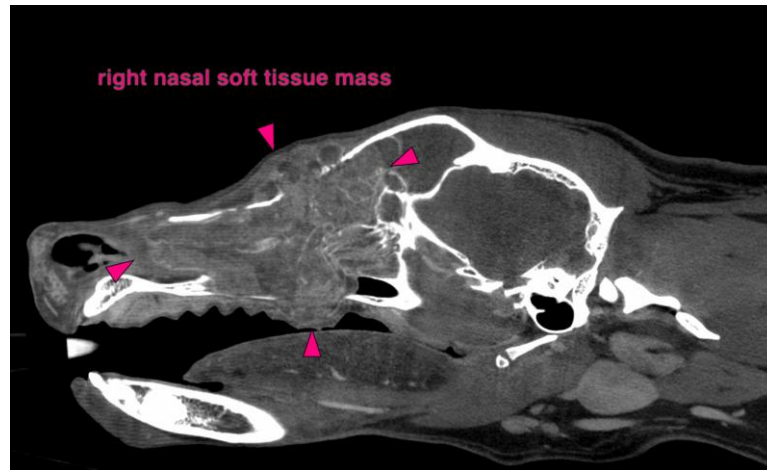
COMPUTED TOMOGRAPHIC DIAGNOSIS

- Biologically aggressive primary right nasal soft tissue neoplasia with polyostotic aggressive osteolytic lesions and perforation of the cranial fossa
- Secondary right sided exophthalmos
- Lymphadenopathy right mandibular lymph nodes
- Bilateral obstructive sinusitis frontal sinus
- Normal thorax, no evidence of pulmonary metastatic disease.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The presenting clinical signs can be explained by the primary nasal soft tissue neoplasm. Differentials include adenocarcinoma, squamous cell carcinoma lymphosarcoma, other. Rhinoscopy including biopsy can be performed for specification. The Adam tumor stage is 4.

Recommend FNA sampling of the right mandibular lymph nodes to screen for metastatic disease.





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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 Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com