



**PATIENT PRESENTING CLINICAL SIGNS**

Leo Bank  
 RIGHT SIDED EPISTAXIS STARTED ABOUT 6 MONTH AGO AND RESOLVED. RETURNED LAST MONTH AND BLEEDING HAS INCREASED IN AMOUNT/FREQUENCY. SMALL SOFT TISSUE GROWTH OR HYPERPLASIA VISIBLE ON PROXIMAL PORTION OF THE RIGHT NASAL PLANUM. DDX TUMOR VS FUNGAL VS RHINITIS VS FOREIGN BODY VS OTHER CHEST CT INCLUDED TO CHECK FOR METASTASIS

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY OF THE SKULL & THORAX**

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

**BREED**

Wheaton Terrier

**COMPUTED TOMOGRAPHIC FINDINGS**

Skull

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

**SEX**

Male Neutered

In the dorsomedial aspect of the right nostril, a moderate contrast enhancing, cauliflower like mass is seen, measuring 4 x 6 x 5 mm in size. In the right nasal cavity, a moderate amount of fluid attenuating material is attached to the nasal conchal structures. In the nasopharynx, a band of soft tissue material is extending into the caudal aspect of the right nasal cavity. Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

**AGE**

11 Years

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.

**INTERPRETED BY**

Sebastian Schaub, DVM  
 Dr. med. vet. DipECVDI

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.

**HOSPITAL NAME**

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 Clinic

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

Thorax

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

**REFERRING VET**

Dr. Bloom

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.

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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.

**DATE**

1-3-23

The lung parenchyma presents the expected architecture and attenuation behavior with randomly distributed interspersed punctuate mineralization.

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

**PATIENT**      **COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Leo Bank
- History of epistaxis
  - Small polypoid lesion right nasal opening
  - Exudate in right nasal cavity
- SPECIES**
- Band of soft tissue material in nasopharynx
  - Pulmonary osteomas
- Canine
- No evidence of pulmonary metastatic disease

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The small soft tissue mass in the right nostril can present small inflammatory polypoid lesion, eosinophilic granuloma or neoplasia (e.g. squamous cell carcinoma, melanoma) and might be a source for hemorrhage and right sided epistaxis. Excisional biopsy is recommended for further definition.

The soft tissue material in the right nasal cavity is suggestive for blood attached to the nasal mucosal lining – I do not see evidence of a nasal mass. The elongated soft tissue material in the nasopharynx, extending into the nasal cavity can present a streak of coagulated blood, however a foreign body is a differential and needs to be ruled out by retrograde evaluation of the nasopharynx.

Other differentials for epistaxis include immune mediated disease, non-specific rhinitis (e.g. lymphocytic plasmocytic), hyperviscosity syndrome (e.g. Leishmaniosis), other causes for coagulopathy or systemic hypertension.



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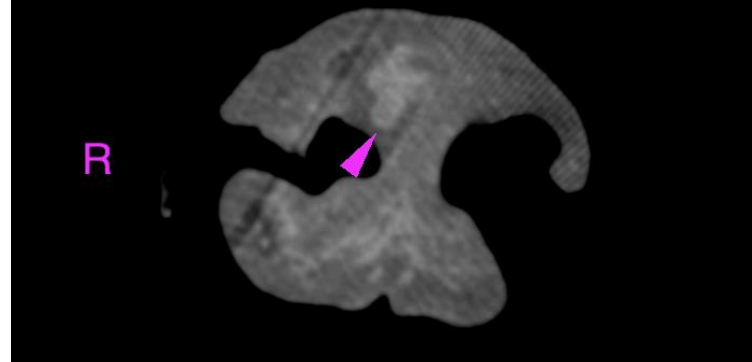
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band of soft tissue material

soft tissue mass right nostril





**PATIENT**

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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.

**BREED**

Wheaton Terrier

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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