



PATIENT PRESENTING CLINICAL SIGNS

Cathy Strough
SPECIES History: Reason for today's visit: Holly is presented for a CT but O explains that symptoms have been declining in Holly's health. Holly has had an infection and some swelling in her eye, O was told by Vet (not us) to give Benadryl. O has stopped 3-4 days ago due to Holly acting abnormal. Holly keeps her eyes closed more, she had been stumbling, hiding from O, acts like she doesn't know O, is struggling to stand on her own, O explains there is drainage coming out of Holly's eyes, as well as blood and mucus coming out of her nose. O explains that Holly is not exactly vomiting but is gagging and having a yellow mucus like spit up. Holly hasn't E/D for 3 days now. holly is fed Purina Pro plan, O typically doesn't free fed but due to Holly not eating she has been leaving the food out.
BREED U/P, How long has problem been going on: Yesterday If pet has had this problem in the past, what medications or treatments helped: Benadryl
Lab Mix

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL

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

Spayed Female

COMPUTED TOMOGRAPHIC FINDINGS

AGE

9

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

The right nasal cavity and the right frontal sinus are obliterated by an expansile, soft tissue attenuating and heterogeneous contrast enhancing mass. Advanced destruction of the associated conchal & turbinate structures of the right nasal cavity is appreciated. The right maxillary bone, right frontal bone and perpendicular plate of the right palatine bone present permeative osteolytic lesions and the nasal mass is bulging into the subcutaneous tissue at the dorsal aspect of the nose, right orbit. Osteolytic lesions of the right aspect of the cribriform plate are appreciated and contrast enhancing material is protruding into the right rostral cranial fossa, extending up to the level of the right frontal lobe. The rostral aspect of the right cerebral hemisphere is distorted by the mass effect.

INTERPRETED BY

Sebastian Schaub,
 DVM Dr. med. vet.
 DipECVDI

HOSPITAL NAME

Neel VH

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.

REFERRING VET

Dr. Ellen Domnick

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.

COMPUTED TOMOGRAPHIC DIAGNOSIS

INVOICE

20178

- Biologically aggressive right nasal soft tissue neoplasia with polyostotic aggressive osteolytic lesions and perforation of the cranial fossa

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

12/16/22



PATIENT

Cathy Strough

The right nasal mass is consistent with primary nasal neoplasia, perforating the cranial fossa with mass effect on the right cerebral hemisphere. Differentials include adenocarcinoma, squamous cell carcinoma, transitional cell carcinoma, lymphosarcoma, other. Rhinoscopy including FNA sampling 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.

SPECIES

Canine

BREED

Lab Mix

SEX

Spayed Female

AGE

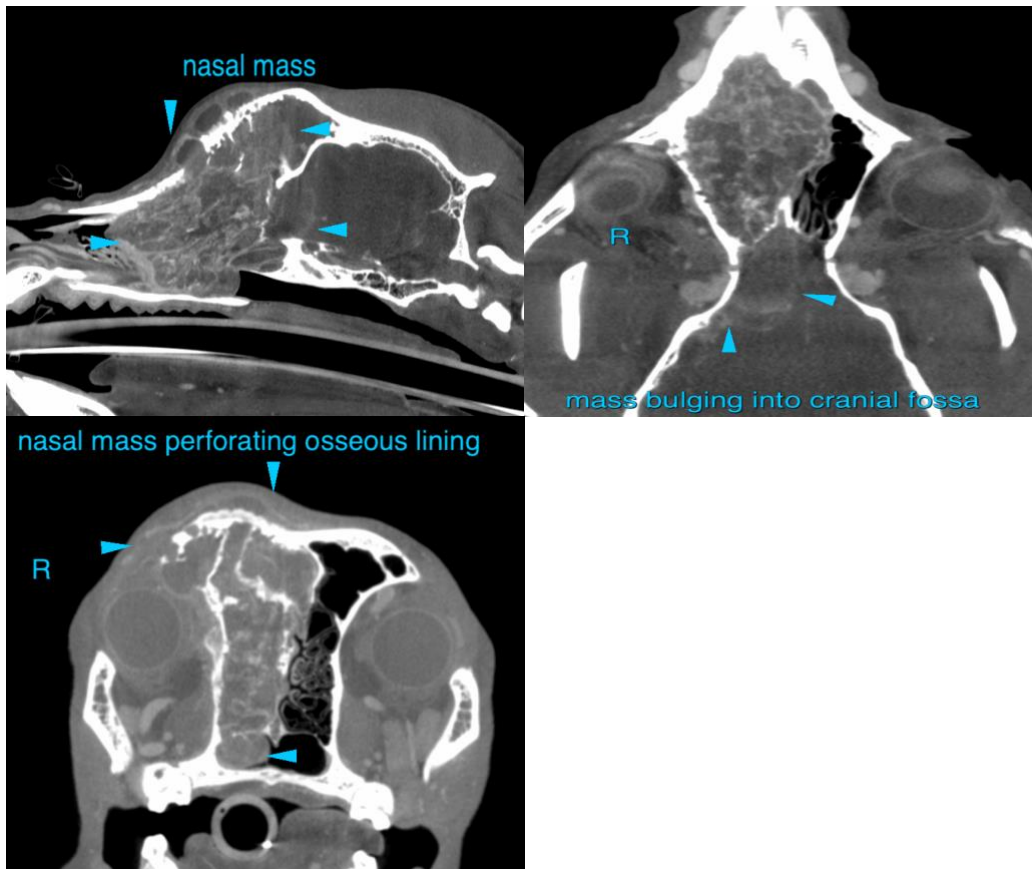
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

REFERRING VET

Dr. Ellen Domnick

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.

INVOICE

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Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
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