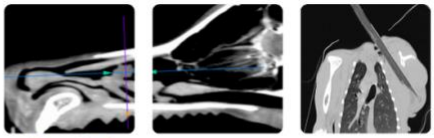

PATIENT

Venom Hunt

SPECIES

Canine

BREED

Malinois

SEX

Male

AGE

2 Years

WEIGHT

90 Pounds

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Amanda Hartman, DVM

HOSPITAL NAME

White Hall AC

REFERRING VET

Amanda Hartman, DVM

INVOICE

35764

DATE

12/5/25

PRESENTING CLINICAL SIGNS

History: Couple month history of intermittent nose bleeds; o believes is only from R nostril; usually only happens with dock diving and high drive/velocity of air movement with the adrenaline. Does not happen during bite work though. However, nosebleed happened last night after vaccine appointment with no excitement or stress.

Abnormal PE/Chem/CBC/UA Results: Chest rads normal, 4dx Neg, Chem/CBC/Clotting recommended and pending; 2 fractured incisors not bothering pet.

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL

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

COMPUTED TOMOGRAPHIC FINDINGS

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

In the dorsal aspect of the frontal sinus bilaterally, soft tissue attenuating material without overt contrast uptake is appreciated, R>L. The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

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 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

- Soft tissue material in frontal sinus bilaterally

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The soft tissue material in the frontal sinus in combination with the preceding epistaxis can present blood clot/exudate in the frontal sinuses. The findings are unusual for frontal sinus mass such as neoplasia or inflammatory polypoid lesion/granuloma. There is no image feature indicative for mycotic rhinitis. Other possible causes 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. A follow up CT of the skull in 3-4 weeks can be used for reevaluation of the frontal sinuses.

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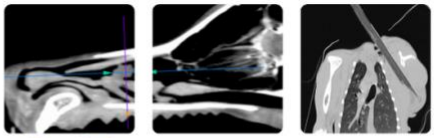

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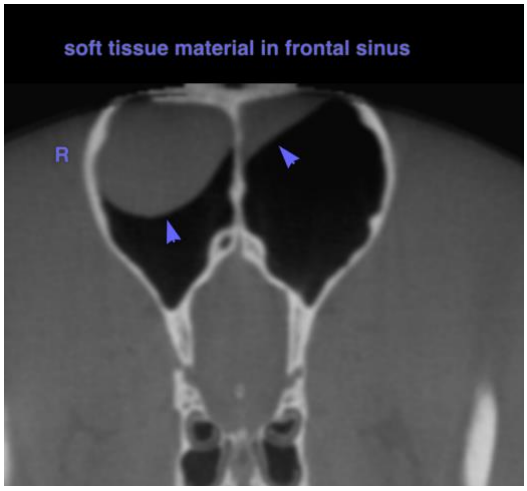

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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