



PATIENT PRESENTING CLINICAL SIGNS

Charlie Nejamie Blood in nasal canal. Hx of dry eye.

COMPUTED TOMOGRAPHY OF THE SKULL

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

Canine **COMPUTED TOMOGRAPHIC FINDINGS**

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

BREED Fluid attenuating material is attached to the mucosal lining of the right nasal opening. The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

Lab

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

SEX

Neutered Male

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals present a mild thickened wall with small mineralization of the wall.

AGE

9 Years

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Suspect bilateral mild otitis media and secondary mild dystrophic mineralization of the wall
- Normal upper airways but possible exudate in nasal opening

HOSPITAL NAME

Mobile Pet Imaging

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is no evidence for neoplastic disease of the nasal cavity or foreign body related rhinitis. The material in the right nostril is considered as dried blood – correlate with clinical findings. If a mass in the nostril was ruled out, potentials 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.

REFERRING VET

Meaux

INVOICE

56704

DATE

2-13-23



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Charlie Nejamie

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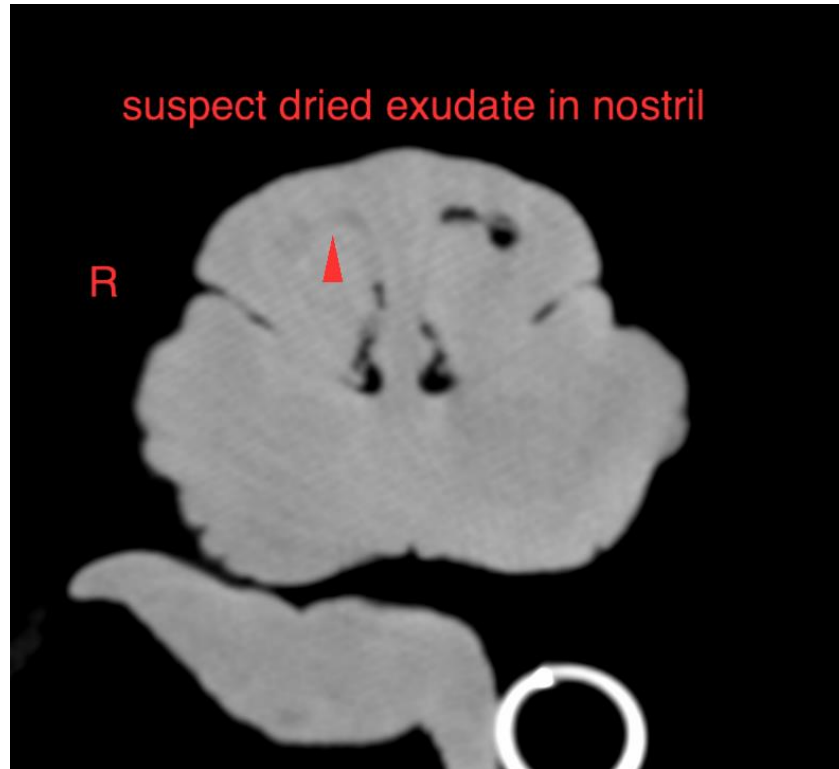
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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