



PATIENT PRESENTING CLINICAL SIGNS

Watson Chamber Large swelling on top of skull.

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 Centered on the dorsal aspect of the nasal cavity, a uniform soft tissue attenuating and heterogeneous contrast enhancing mass is seen. The associated maxillary, frontal and nasal bone bilaterally present aggressive osteolytic lesions and the mass is bugling into the subcutaneous tissue along the dorsal aspect of the nose and frontal sinuses. The cribriform plate presents advanced osteolysis.

Lab

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

Male Intact Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals present a moderate thickened wall and shell-like mineralization.

AGE 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.

6 Years, 8 Months

The submandibular and medial retropharyngeal lymph nodes are prominent.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Biologically aggressive nasal soft tissue neoplasia with polyostotic aggressive osteolytic lesions of the associated osseous structures, perforation of the cranial fossa and subcutaneous extension of the mass
- Lymphadenopathy mandibular and medial retropharyngeal lymph nodes bilaterally
- Bilateral chronic otitis externa with dystrophic mineralization of the external ear canals

HOSPITAL NAME

Mobile Pet Imaging

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Meaux The finding are consistent with biologically aggressive primary neoplasia originating from the nasal cavity/frontal sinuses and secondary osteolysis of the associated osseous structures and perforation of the cranial fossa. The nasal mass is extending into the subcutaneous tissue at the dorsal aspect of the nose – explaining the clinical findings. Differentials include adenocarcinoma, squamous cell carcinoma, transitional cell carcinoma, lymphosarcoma, other. FNA sampling/biopsy of the subcutaneous swelling can be used as advanced diagnostic test. 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.

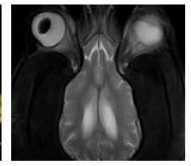
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The odds for metastatic spread or reactive hyperplasia of the tributary lymph nodes are equal and further differentiation warrants FNA sampling.



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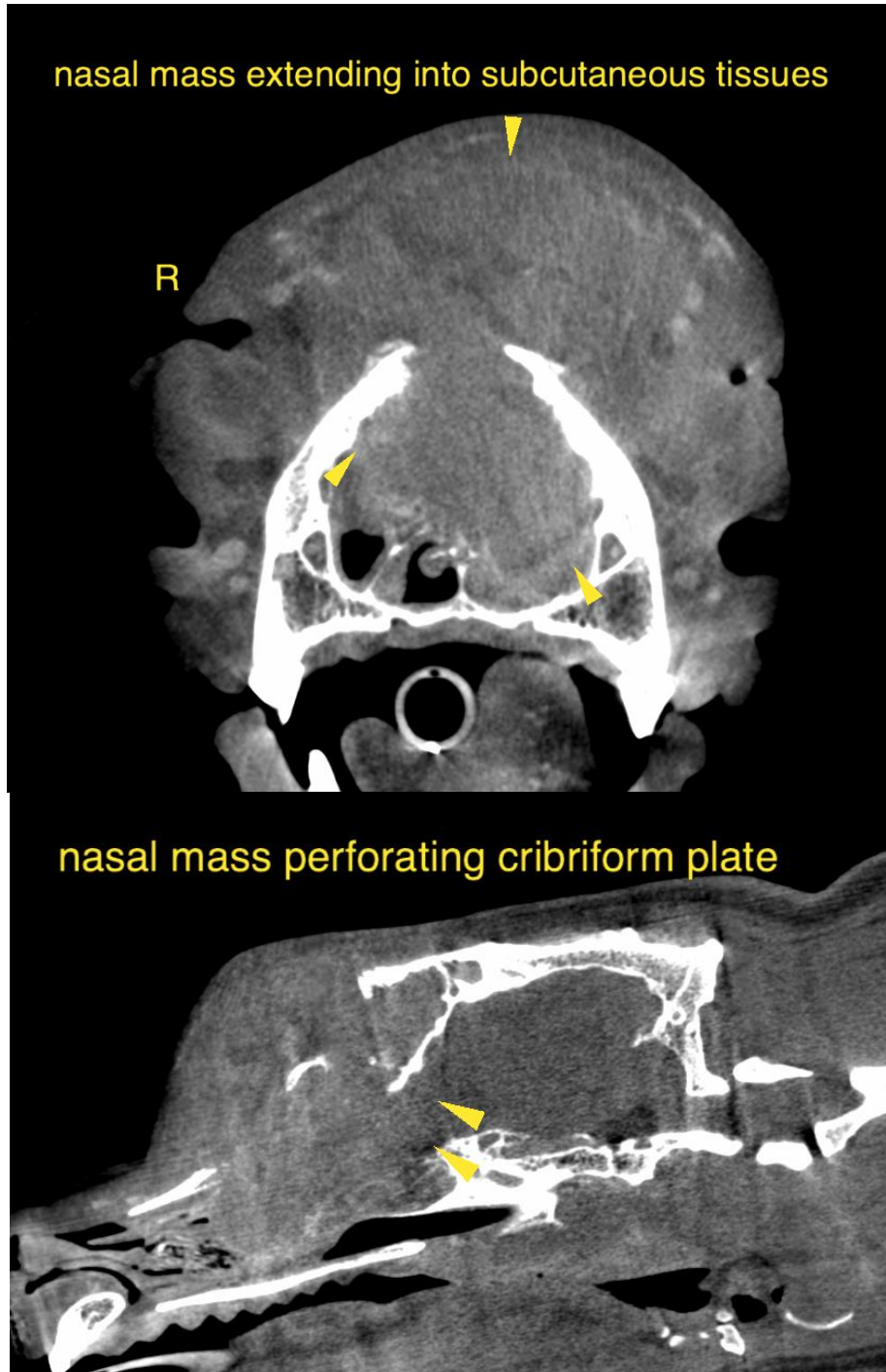
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**PATIENT**

Watson Chamber

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.

SPECIES

Canine

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.

BREED

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SEX

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