



## PATIENT

Olaf Flynn

## SPECIES

Canine

## BREED

Golden Retriever

## SEX

M

## AGE

3Y

## WEIGHT

58lbs

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet.  
DipECVDI

## IMAGING PERFORMED BY

Amanda Aasheim, LVT

## HOSPITAL NAME

Advanced Animal  
Imaging

## REFERRING VET

Michelle Hoffman,  
DVM

## INVOICE

73871

## DATE

2-19-26

## PRESENTING CLINICAL SIGNS

Active epistaxis noted from the right nostril during examination. Is intermittent according to owner. Clear bronchovesicular sounds, no crackles or wheezes noted bilaterally. Patient observed to be reverse sneezing. differential diagnoses include severe allergic rhinitis, nasal polyp, or a nasal mass. On and off since June 2024

## COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

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

## COMPUTED TOMOGRAPHIC FINDINGS

### Skull

The pictured parts of the dentition are complete. Gemination of triadan 105 is appreciated.

In the right nasal cavity, moderate destruction of the conchal structures is appreciated. The right frontal sinus is partially obliterated by irregular marginated, non-contrast enhancing soft tissue material. The osseous lining of the right frontal sinus present with moth eaten osteolysis and zones with hyperostosis. The cribriform plate is intact.

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 right medial retropharyngeal lymph node is prominent.

### Thorax

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

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.

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.

The lung parenchyma presents the expected architecture and attenuation behavior.

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

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right sided destructive rhinosinusitis along with semiaggressive osteolytic lesions and hyperostosis of the osseous lining
- Lymphadenopathy right medial retropharyngeal lymph node



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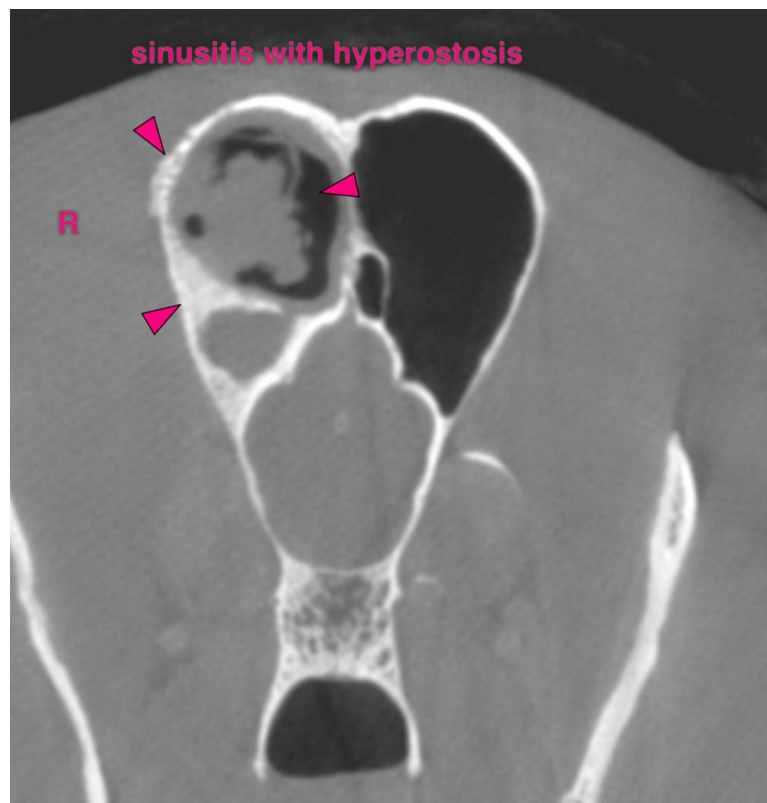
2-19-26

- Gemination of triadan 105
- Normal thorax

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The destructive rhinitis in combination with the hyperostosis of the osseous lining is consistent with mycotic rhinitis – such as *Aspergillus* sp. Recommended rhinoscopy for further evaluation with sampling for culture and histopathology (detection of fungi microscopically is more straightforward than with culture in many cases).

Secondary reactive lymphoid hyperplasia of the right medial retropharyngeal lymph node.





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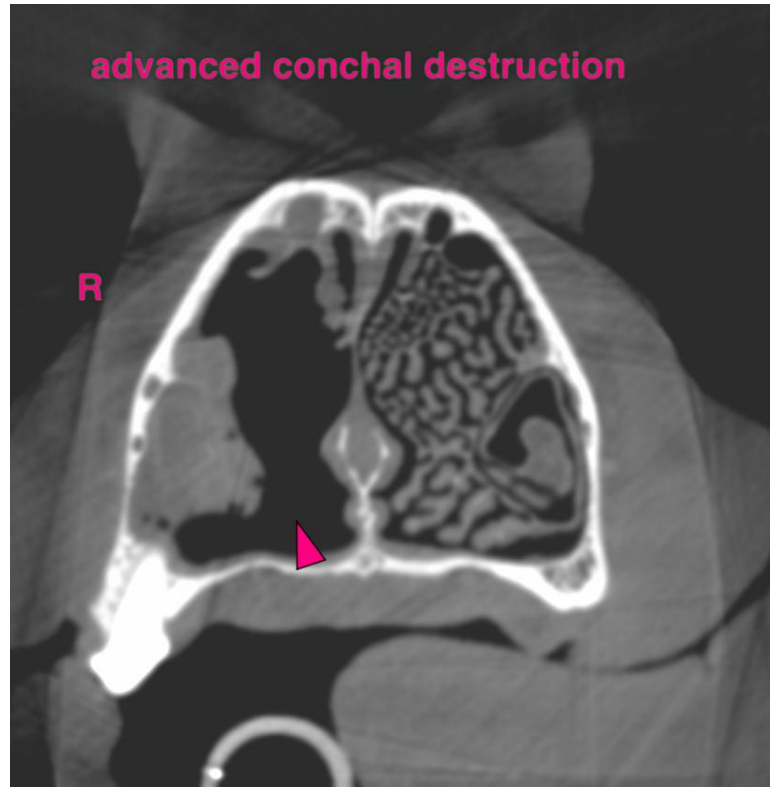
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
[info@sonopath.com](mailto:info@sonopath.com)