



PATIENT

Nacho Forman

SPECIES

Canine

BREED

Labrador Mix

SEX

Neutered Male

AGE

12

WEIGHT

52.2

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

WS

HOSPITAL NAME

Aloha Pet & Bird
Hospital

REFERRING VET

Dr. Lopez

INVOICE

74073

DATE

3-5-26

PRESENTING CLINICAL SIGNS

- Patient is a 12 Y/O MN Mix presenting for epistaxis which began on 01/30/2026. The bleeding was reportedly less severe this morning but is ongoing and accompanied by a clear nasal discharge. The owner is uncertain if the bleeding is unilateral or bilateral. This is the first episode. Patient has a normal appetite and thirst, with normal urination and defecation. No V/D/C/S. No known trauma or toxin exposure.
- Diet: none reported
- Current Medications/ supplements: none

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

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

COMPUTED TOMOGRAPHIC FINDINGS

Skull

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

The right nasal cavity is obliterated by a mild expansile, uniform soft tissue attenuating and irregular contrast enhancing mass. Destruction of the associated nasal conchal structures is seen. The nasal septum is deviated to the left by the mass effect. The right nasal mass is perforating the cribriform plate and is mildly bulging into the right rostral cranial fossa. Along the lateral aspect of the osseous lining of the right nasal cavity, immature mild periosteal new bone formation is seen. The right frontal sinus is filled with fluid attenuating material.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered 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 lateral of the right mandibular lymph nodes 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.



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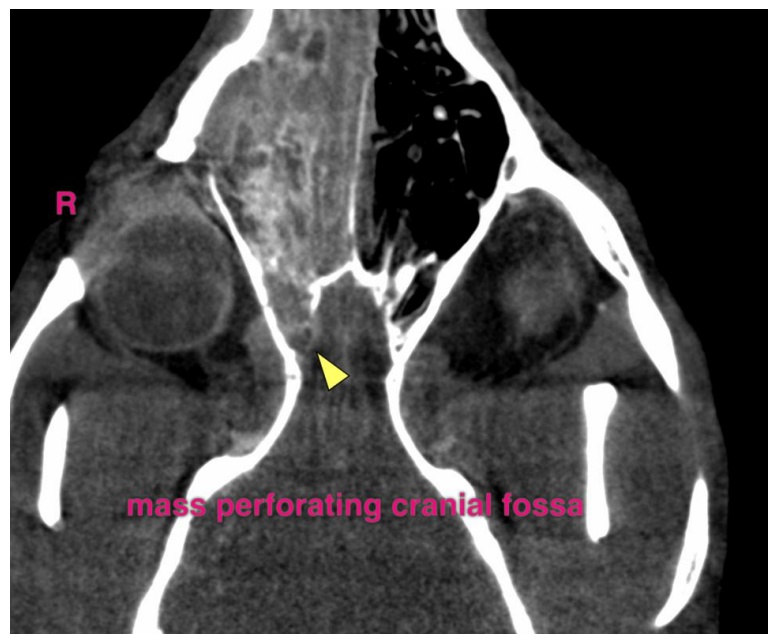
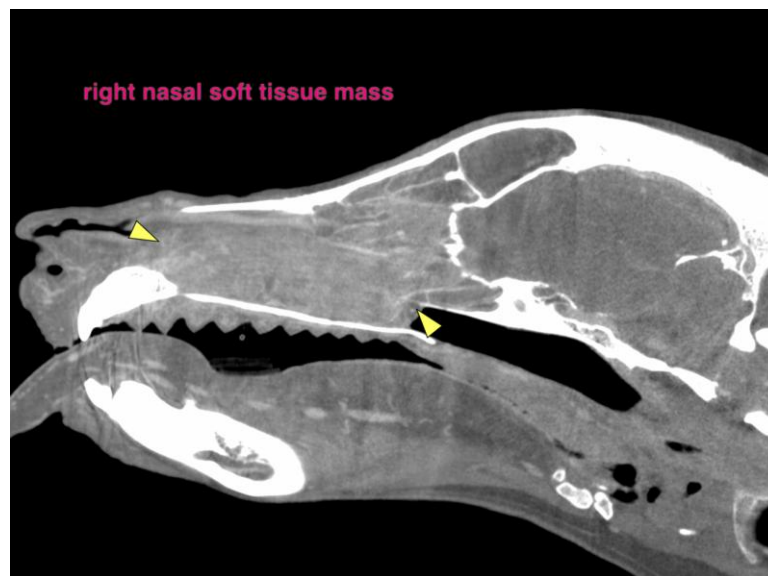
3-5-26

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Biologically aggressive primary right nasal soft tissue neoplasia, perforating the cranial fossa
- Secondary obstructive sinusitis right frontal sinus
- Lymphadenopathy of the lateral of the right mandibular lymph nodes
- No evidence of pulmonary metastatic disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The right nasal soft tissue mass is consistent with primary nasal soft tissue neoplasia. Differentials include adenocarcinoma, squamous cell carcinoma lymphosarcoma, other. Rhinoscopy including biopsy can be performed for specification. The Adam tumor stage is 4.





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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