



**PATIENT**

Axel Reinman

**PRESENTING CLINICAL SIGNS**

noted from rdvm 2/16/23: Bleeding from nose and eye. Dec 15th went to rdvm for yearly and everything looked good. 1 week later started sneezing. Has been sneezing blood for 5 weeks. E/D/U/BM normal. Laying around a little. Bleeding stopped once on antihistamine. Came back a few days ago. Put on antibiotics. Bleeding started more yesterday; labwork with rdvm at thsi time was wnl, including pt/ptt\_

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY OF THE SKULL**

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

**BREED**

Shepherd Mix

**COMPUTED TOMOGRAPHIC FINDINGS**

The tip of the crown of triadan 202 is absent, exposing the pulp cavity to the dental surface.

**SEX**

Neutered Male

The right nasal cavity is obliterated by an expansile, soft tissue attenuating and heterogeneous contrast enhancing mass. Advanced destruction of the associated nasal conchal and turbinate structures is seen. The right maxillary bone, right nasal bone, perpendicular plate of the right palatine bone and right frontal bone present extensive aggressive osteolytic lesions and the nasal mass is protruding into the subcutaneous tissue and right orbit. The right ocular bulb is deviated laterally and rostrally by the mass effect. The cribriform plate is perforated and the nasal mass is bulging into the right rostral cranial fossa. The nasal septum is mildly deviated to the left.

**AGE**

10.5 Years

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

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The wall of the horizontal segment of the left external ear canal is moderately thickened and the epithelial lining is irregular.

**HOSPITAL NAME**

Aloha Pet & Bird  
Hospital

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**

- Biologically aggressive right nasal soft tissue neoplasia
- Secondary polyostotic aggressive osteolytic lesions of the associated osseous structures and perforation of the cranial fossa
- Secondary right sided exophthalmos
- Complicated dental fracture 202

**REFERRING VET**

McLaughlin

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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The CT findings are consistent with biologically aggressive primary nasal soft tissue neoplasia and secondary polyostotic aggressive bone lesions with perforation of the cranial fossa. Differentials include adenocarcinoma, squamous cell carcinoma, transitional cell carcinoma, lymphosarcoma, other. Rhinoscopy including FNA sampling can be used as advanced diagnostic tests. 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.

**DATE**

3-6-23



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**REFERRING VET**

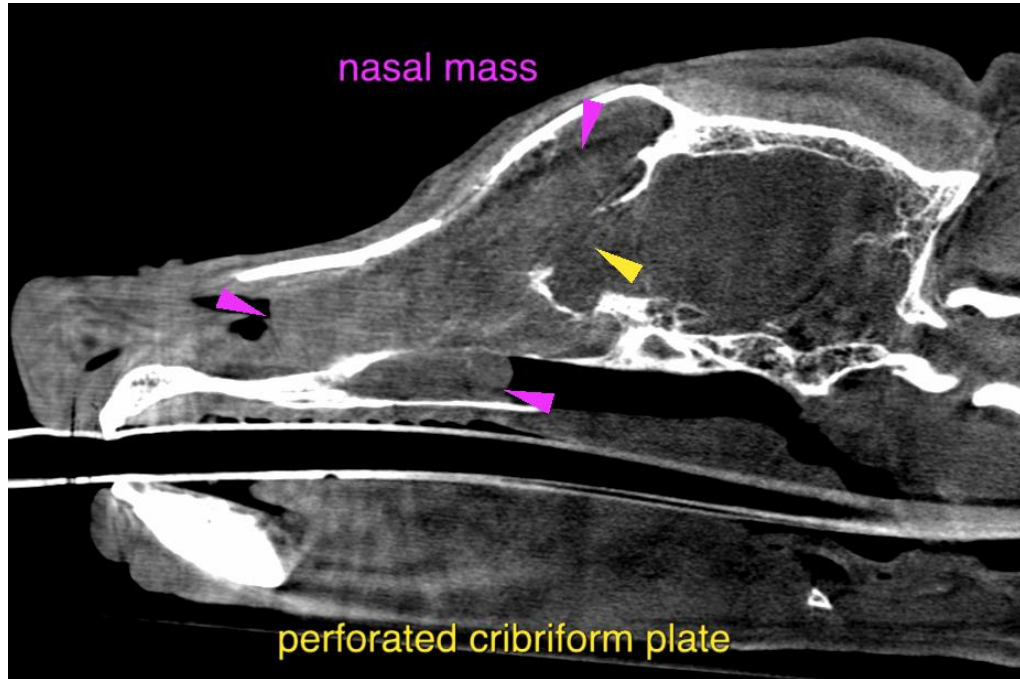
McLaughlin

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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  
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