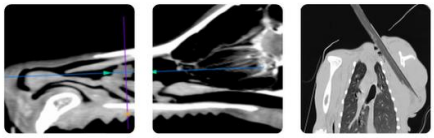

PATIENT

Sophia Mumock

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

FS

AGE

5

WEIGHT

7.36kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Dr. Runde

HOSPITAL NAME

Northeast Veterinary Referral Hospital

REFERRING VET

Dr. Runde

INVOICE

74732

DATE

4-22-26

PRESENTING CLINICAL SIGNS

Was outside a few months ago and since then she started having revserse sneezing. It is much worse in the morning and has been getting worse over the last few months ago.
Abnormal PE/Chem/CBC/UA Results: normal

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

Triadan 301 is absent. Triadan 305 and 405 are retained in the alveolar bone.

In the right nasal cavity, mild to moderate destruction of the nasal conchal structures is seen. A small amount of fluid attenuating material is attached to the nasal mucosal lining of the right nasal cavity.

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 with randomly distributed interspersed sporadic punctuate mineralization.

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right sided destructive rhinitis
- Mild lymphadenopathy right medial retropharyngeal lymph node – compatible with reactive lymphoid hyperplasia
- Retained triadan 305 and 405 without retention cyst formation
- Absent triadan 301

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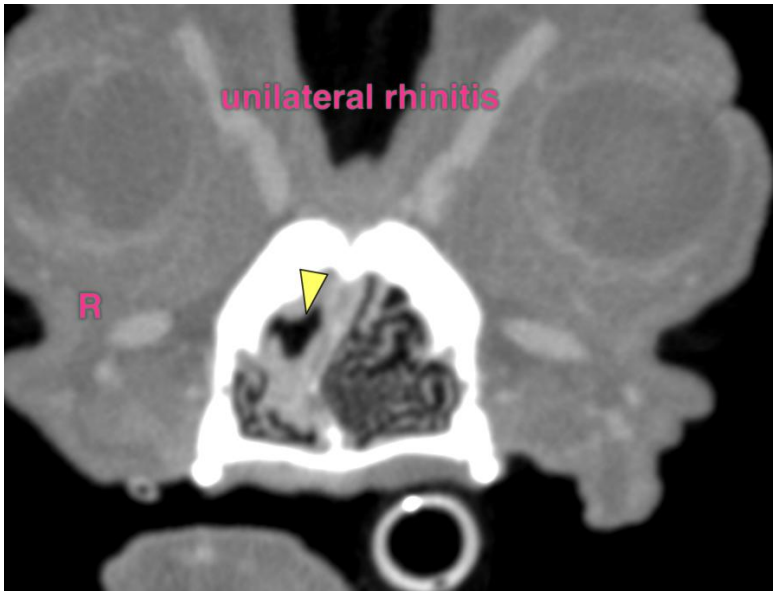
- Normal thorax, but sporadic pulmonary osteomas

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

An underlying cause for the unilateral rhinitis cannot be specified and the odds for non-specific rhinitis (e.g. lymphoplasmacytic, eosinophilic, allergic) are high. Due to the unilateral behavior, foreign body related rhinitis or mycotic rhinitis are differentials, but I consider the odds low here. There is no evidence of odontogenic rhinitis or nasal soft tissue mass. Rhinoscopy including biopsy may be beneficial as advanced diagnostic tool.



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