



PATIENT

Zeke Ashburn

SPECIES

Canine

BREED

German Shepherd

SEX

Male Neutered

AGE

7Y

WEIGHT

85lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Dr. Burge

HOSPITAL NAME

Wilson Veterinary
Hospital

REFERRING VET

Richmond Veterinary
Hospital

INVOICE

74729

DATE

4-22-26

PRESENTING CLINICAL SIGNS

Recent onset of frequent nose bleeds, right nostril
No significant abnormalities on CBC/Chem
Aspergillosis negative 4/16

COMPUTED TOMOGRAPHY OF THE SKULL

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

COMPUTED TOMOGRAPHIC FINDINGS

The pictured parts of the dentition are complete. Abrasion of the tips of the crowns of the incisor and canine teeth is appreciated.

The right nasal cavity is obliterated by a uniform soft tissue attenuating and moderate contrast enhancing mass. Destruction of the associated nasal conchal structures is seen. The nasal septum is mildly deviated to the left. The perpendicular plate of the right palatine bone and the right aspect of the cribriform plate present permeative osteolysis and are perforated. The right nasal soft tissue mass is protruding into the caudomedial aspect of the right orbital cavity and right rostral cranial fossa. The olfactory bulbs are distorted by the mass effect – a midline shift to the left is appreciated. The right frontal sinus is filled with fluid attenuating material.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Biologically aggressive primary right nasal soft tissue neoplasia with polyostotic aggressive osteolytic lesions and perforation of the cranial fossa
- Secondary obstructive sinusitis right frontal sinus

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The right nasal soft tissue mass is consistent with primary nasal soft tissue neoplasia – perforating the cranial fossa with mass effect on the olfactory bulbs. 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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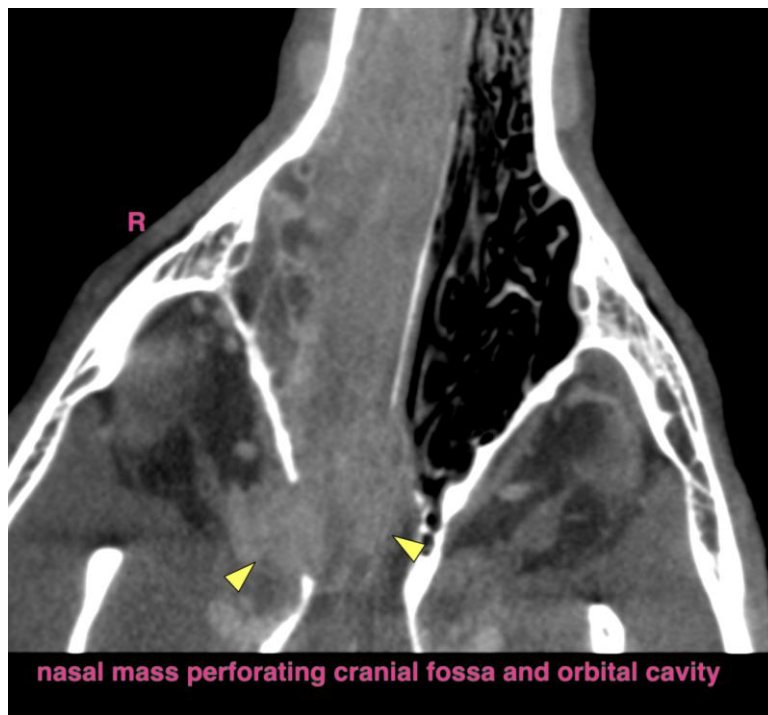
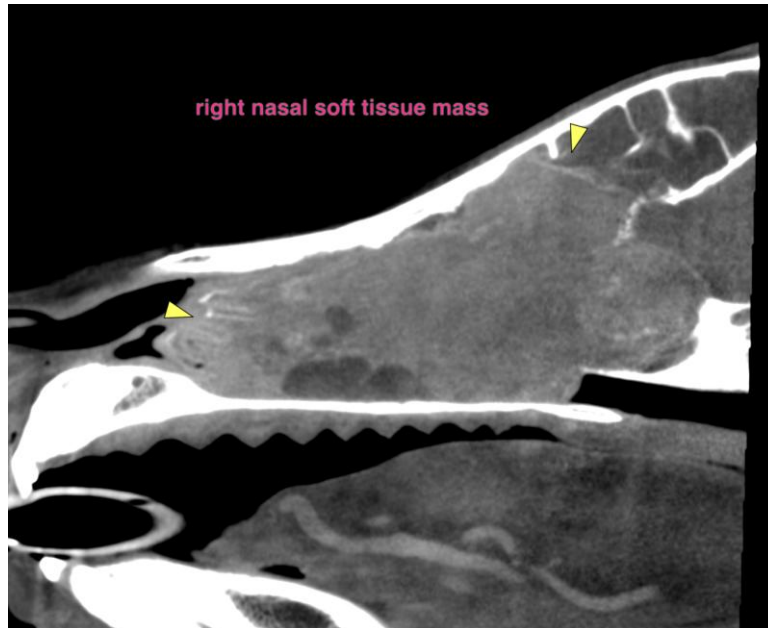
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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