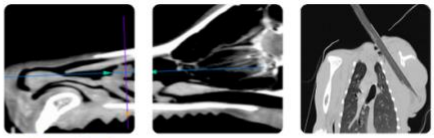


PATIENT

Kody Williams

SPECIES

Canine

BREED

Poodle

SEX

Neutered Male

AGE

7 Years

WEIGHT

29.1

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Kirsten Bodi

HOSPITAL NAME

Bluegrass VS

REFERRING VET

Dr. Kelly Gavin

INVOICE

37251

DATE

5/30/26

PRESENTING CLINICAL SIGNS

History: 2 month history of thick mucoid drainage starting on the left, worsening with occasional blood. Neck included for Biopsies pending. Neck and thorax included for to rule out metastasis. Abnormal PE/Chem/CBC/UA Results:

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL, NECK AND THORAX

A pre- and post-contrast CT study of the skull, neck and thorax in a bone and soft tissue reconstruction is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Skull & Neck

The tooth element 107 is absent.

The left nasal cavity is obliterated by a uniform soft tissue attenuating and heterogeneous contrast enhancing mass. Destruction of the associated nasal conchal structures is seen. The nasal septum is deviated to the right by the mass effect. Caudally the mass is protruding into the choana, causing complete upper airway obstruction. The left frontal sinus is filled with gravity dependent, fluid attenuating material. The cribriform plate and perpendicular plate of the left palatine bone are perforated, and the nasal mass is mildly bulging into the rostral fossa cranii and left orbital 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 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.

In the subcutaneous tissue at the right dorsal aspect of C3, a well-defined, soft tissue attenuating nodule is seen, measuring 8 mm in diameter.

The remainder of the osseous and soft tissue structures of the neck reveal no abnormalities.

Thorax

The most caudal aspect of the thorax is cropped by the field of view.

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.

PATIENT

Kody Williams

SPECIES

Canine

BREED

Poodle

SEX

Neutered Male

AGE

7 Years

WEIGHT

29.1

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Kirsten Bodi

HOSPITAL NAME

Bluegrass VS

REFERRING VET

Dr. Kelly Gavin

INVOICE

37251

DATE

5/30/26

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.

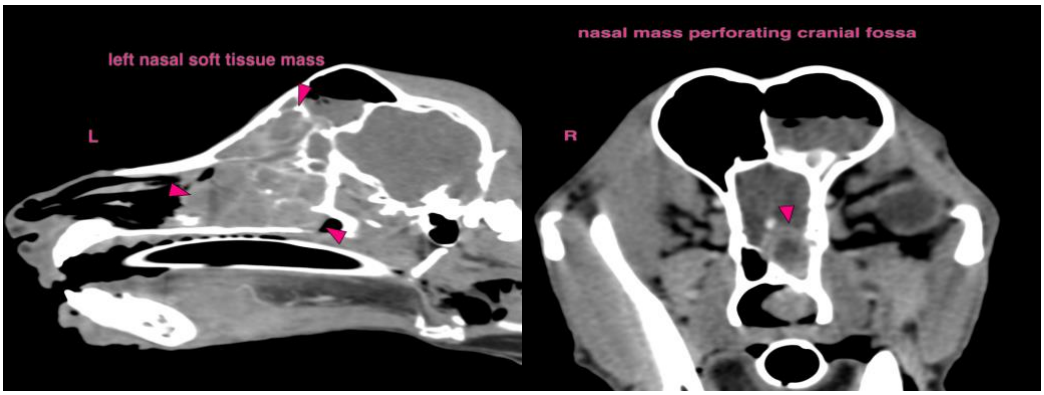
Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Biologically aggressive primary left nasal soft tissue neoplasia with polyostotic aggressive osteolytic lesions and perforation of the cranial fossa
- Secondary obstructive sinusitis left frontal sinus
- Absent triadan 107
- Non-specific subcutaneous nodule right dorsal aspect of C3
- Normal thorax, no evidence of pulmonary metastatic disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings present a biologically aggressive primary left nasal soft tissue neoplasia, perforating the cranial fossa. Differentials include adenocarcinoma, squamous cell carcinoma lymphosarcoma, other. Rhinoscopy including biopsy can be performed for specification. The Adam tumor stage is 4.



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, DVM, Dr. med. vet. DipECVDI
info@sonopath.com