



**PATIENT PRESENTING CLINICAL SIGNS**

**Cuddles Ball** Chronic nasal stertor, reduced airflow left nare. Slight improvement with chlorpheniramine, antibiotics, and predisone Current meds: chlorpheniramine 2mg BID, Prednisone 2.5mg SID, Melatonin 2mg SID

**SPECIES** Abnormal PE/Chem/CBC/UA Results: ALP mildly elevated (on chronic pred for ITP)

**K9 COMPUTED TOMOGRAPHY OF THE SKULL**

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

**BREED COMPUTED TOMOGRAPHIC FINDINGS**

**Mixed** The tooth elements 311&411 are absent.

**SEX** The left nasal cavity is occupied by a uniform soft tissue attenuating and mild heterogeneous contrast enhancing, expansile soft tissue mass. Destruction of the associated conchal & turbinate structures is appreciated. Multifocal aggressive osteolytic lesions of the ethmoid bone, left palatine bone and mildly the left maxillary bone is seen. The nasal mass is perforating the perpendicular plate of the left palatine bone and is bulging into the left orbit. Ventrally the nasal mass is bulging into the submucosa of the hard palate. The nasal septum is perforated by the mass, which is protruding into the ventral aspect of the right nasal cavity. Lysis of the left aspect of the cribriform plate is appreciated.

**AGE** 10 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 external ear canals are within normal limits.

**HOSPITAL NAME**

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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.

**REFERRING VET**

Dr. Erin Walker

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Left sided biologically aggressive nasal soft tissue neoplasm
- Secondary polyostotic aggressive osteolytic lesions of the associated osseous structures and perforation of the cribriform plate
- Absent triadan 311&411

**INVOICE**

52194

**DATE**

5-31-22

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT study is consistent with primary nasal neoplasia, originating from the left nasal cavity. 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.

Consider full tumor staging.



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**SEX**

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**AGE**

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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.

**BREED**

Mixed

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.

**SEX**

FS

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
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**AGE**

10 Years

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