SonoPath Teleradiology
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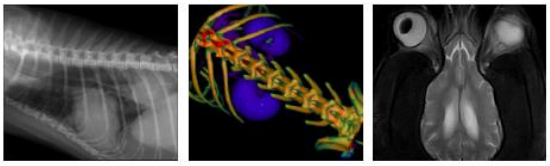
1-800-838-4268 info@sonopath.com



PATIENT

Oreo Hoffman

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

16

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Aloha Pet & Bird Hospital

REFERRING VET

Dr. Pepen

INVOICE

52828

DATE

7-12-22

PRESENTING CLINICAL SIGNS

SNEEZING, OCCASIONAL BLEEDING FROM LEFT NOSTRIL

COMPUTED TOMOGRAPHY OF THE SKULL

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

COMPUTED TOMOGRAPHIC FINDINGS

The pictured parts of the dentition are complete and unremarkable in all jaw quadrants.

The left nasal cavity is obliterated by soft tissue attenuating and heterogeneous contrast enhancing material. The left maxillary bone, perpendicular plate of the left palatine bone and left nasal bone present permeative osteolytic lesions. The nasal soft tissue material is protruding into the subcutaneous tissue at the left dorsolateral aspect of the nose and into medial aspect of the left orbit. Lysis of the cribriform plate is seen, and contrast enhancing material is bulging into the rostral cranial fossa.

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 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

- Left sided biologically aggressive nasal soft tissue neoplasia with polyostotic aggressive osteolytic lesions of the associated osseous structures and perforation of the cranial fossa

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are consistent with primary nasal neoplasia and secondary aggressive osteolytic lesions of the associated osseous structures and evidence of perforation of the cranial fossa. Differentials include lymphosarcoma, adenocarcinoma, squamous cell carcinoma, transitional cell carcinoma, other. Either FNA sampling of the subcutaneous swelling at the dorsolateral aspect of the nose or rhinoscopy including biopsy 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.

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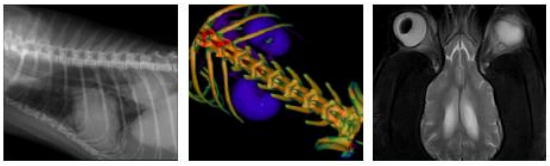

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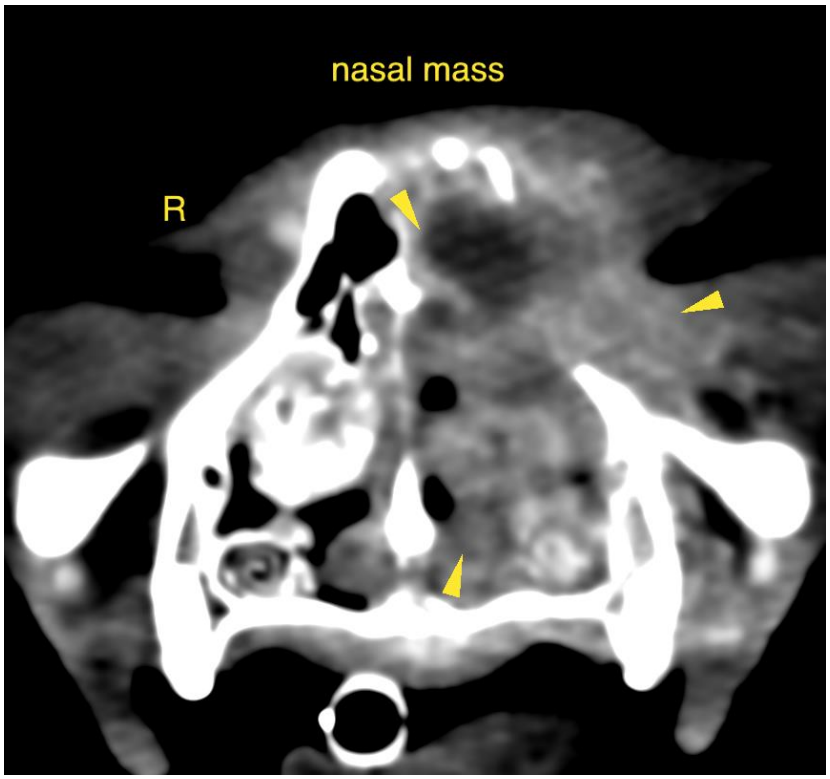

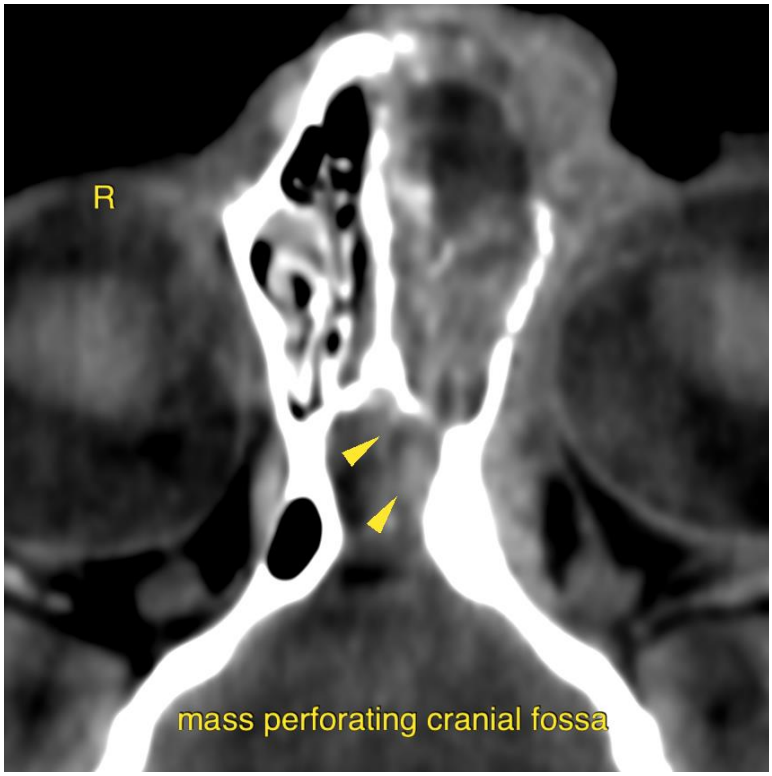

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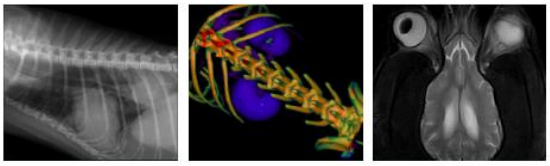

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
sebast.schaub@gmail.com