



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Albert Stickel **PRESENTING CLINICAL SIGNS** History: 1 month history of congestion more severe at night. Minimal airflow in the left nostril . Normal airflow in right nostril. 2 episodes of epistaxis.

SPECIES Abnormal PE/Chem/CBC/UA Results: Leukocytosis with neutrophilia and monocytosis. mild Hyperglobulinemia (Paste history here)

Canine

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL

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

Terrier Mix

COMPUTED TOMOGRAPHIC FINDINGS

The tooth elements 101, 102, 105, 106, 201, 202, 206-208, 301-303, 305, 401-403 are absent.

SEX The rostral two thirds of the left nasal cavity are obliterated by a uniform soft tissue attenuating and irregular moderate contrast enhancing mass. Destruction of the left nasal conchal & turbinate structures is appreciated. The nasal septum is deviated to the right by the mass effect. Level with triadan 108, the mass is perforating the nasal septum and is mildly bulging into the right nasal cavity. Caudally the mass is extending up to the level of the choana. The horizontal plate of the left palatine bone and the alveolar process of the left maxillary bone present moth eaten osteolytic lesions and are perforated.

Neutered Male

AGE 10 Years

10 Years

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

INTERPRETED BY

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.

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

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.

HOSPITAL NAME

Petroglyph AH

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.

Segmental fat stranding is seen along the left jugular vein – likely due to preceding venipuncture.

REFERRING VET

Eric Randall

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Left nasal soft tissue mass with polyostotic aggressive osteolytic lesions
- Multiple absent teeth, see above

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The left nasal soft tissue mass is consistent with primary nasal neoplasia and secondary osteolytic lesions of the associated osseous structures. Differentials include adenocarcinoma, squamous cell carcinoma, transitional cell carcinoma, lymphosarcoma, other. Rhinoscopy including biopsy can be

DATE

7/20/23



PATIENT

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 T3.

Albert Stickel

SPECIES

Canine

BREED

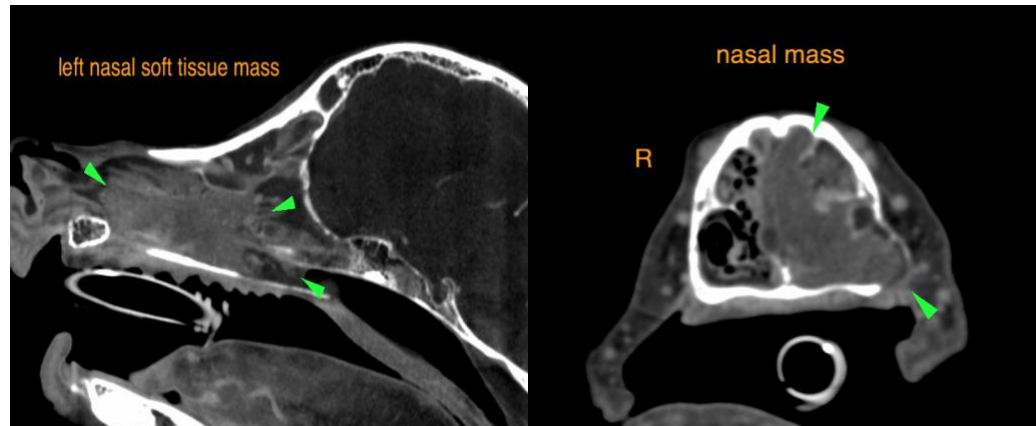
Terrier Mix

SEX

Neutered Male

AGE

10 Years



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.

INTERPRETED BY

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