



**PATIENT**

Mao Hayashi

**PRESENTING CLINICAL SIGNS**

Owner noted a more bulging right eye and eating more on the right side for last few weeks. Abnormal PE/Chem/CBC/UA Results: Right eye laterally deviated. IOPs normal. Firm swelling below right eye. Upper right teeth with mobility and bone loss. Nasal congestion noted, no discharge. FNA of taken through oral cavity into nasal passage: pending CBC/Chem: mild anemia

**SPECIES**

Canine

**COMPUTED TOMOGRAPHY OF THE SKULL**

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

**BREED**

Pug

**COMPUTED TOMOGRAPHIC FINDINGS**

Multiple teeth are absent. The remaining teeth present evidence of advanced periodontal disease.

**SEX**

Female

An expansile soft tissue mass is centered on the right nasal cavity, presenting a homogeneous soft tissue attenuation pattern and heterogeneous contrast enhancement. The associated osseous structures of the right aspect of the midface present advanced permeative osteolysis – including the rostral segment of the right zygomatic arch – and the mass is bulging into the subcutaneous tissue at the lateral aspect of the nose and into the right orbit. Lysis of the medial wall of the right orbit is appreciated with perforation of the cranial fossa. The right ocular bulb is deviated laterally by the mass effect.

**AGE**

14 Years, 4 Months

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

The left tympanic bulla and the left external ear canal are occupied by soft tissue attenuating material without contrast enhancement. Both external ear canals present mild to moderate shell-like mineralization of the wall.

**HOSPITAL NAME**

Gentle Doctor Animal Hospital

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 prominent.

**REFERRING VET**

Dr. A Taplett

- Expansile soft tissue mass centered on the right maxillary bone with polyostotic aggressive osteolytic lesions of the associated osseous structures with perforation of the cranial fossa
- Secondary right sided exophthalmos
- Lymphadenopathy tributary lymph nodes of the skull
- Generalized advanced periodontal disease
- Left sided otitis media and externa
- Multiple absent teeth
- Dystrophic mineralization of the external ear canals

**INVOICE**

52720

**DATE**

7-6-22

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The findings are consistent with primary soft tissue mass – possibly originating from the right maxillary bone or right nasal cavity – with secondary polyostotic osteolytic lesions and perforation of the cranial fossa. Differentials include osteosarcoma, fibrosarcoma, adenocarcinoma, squamous cell carcinoma, lymphosarcoma, other. The finding is explaining the



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clinical signs. FNA sampling has already been performed, regarding the history and results are pending, regarding the history. Based on the results of the advanced diagnostic tests, the chances of radiation therapy can be discussed with oncologist.

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The odds for reactive hyperplasia or metastatic spread to the regional lymph nodes are considered equal. FNA sampling can be used as advanced diagnostic test.

Consider full tumor staging.

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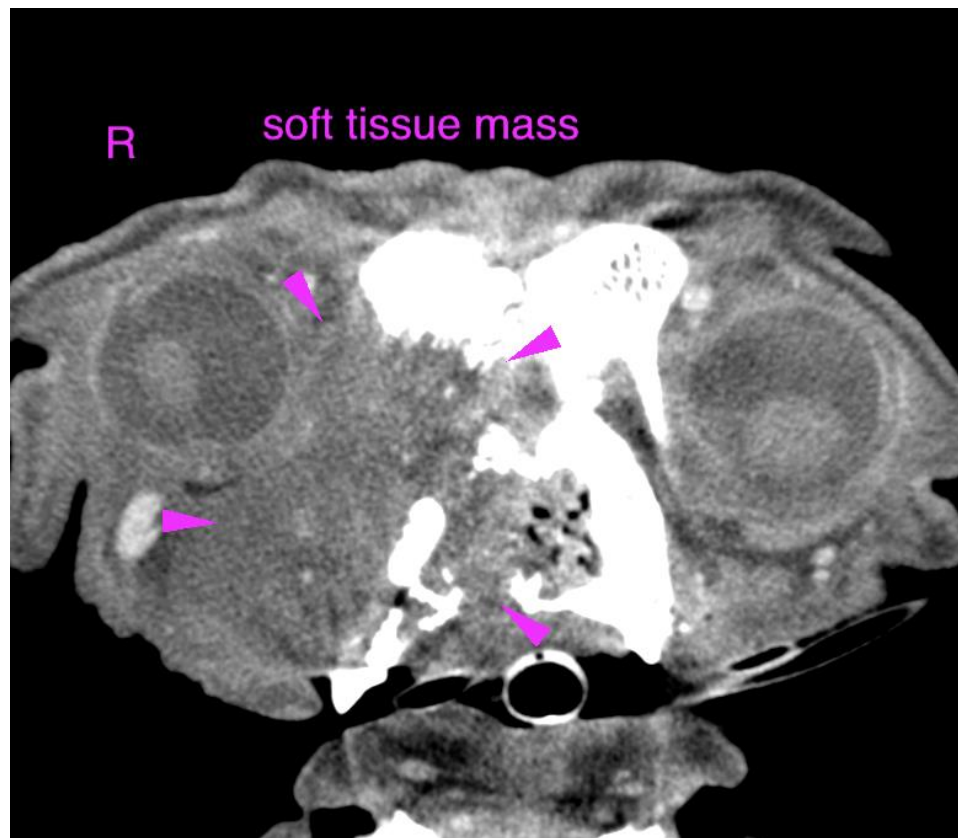
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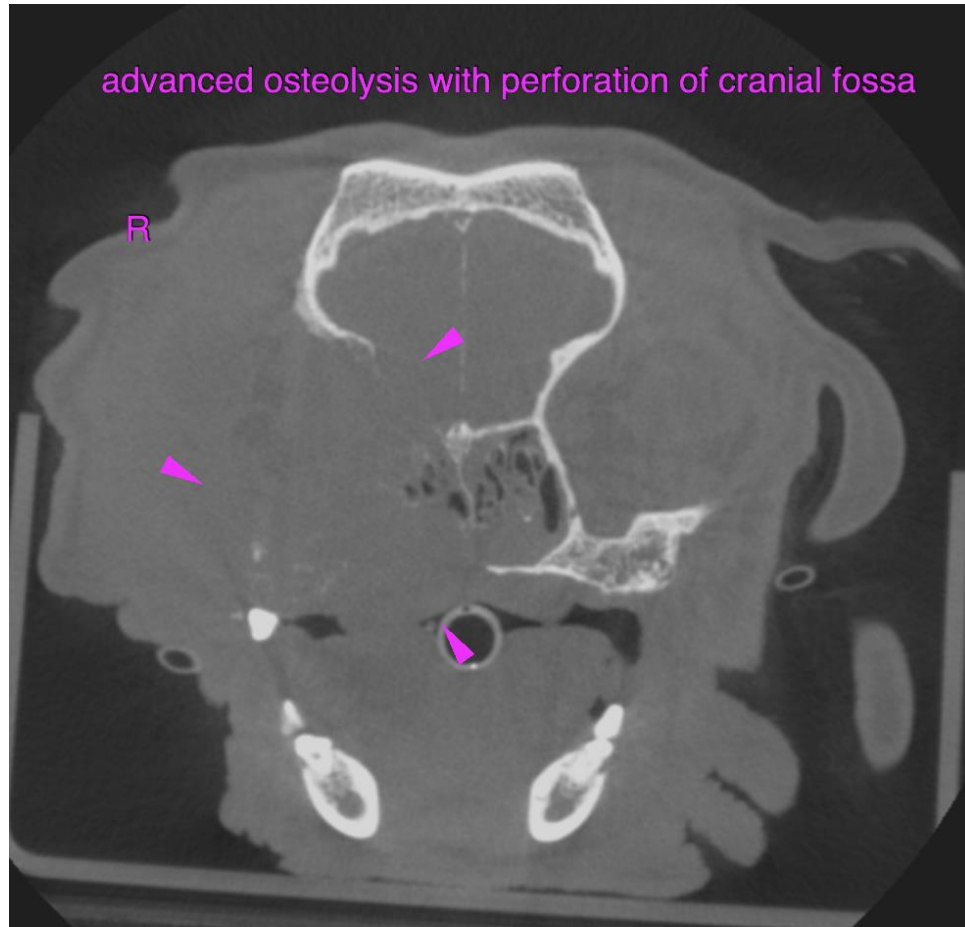
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advanced osteolysis with perforation of cranial fossa

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  
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