



**PATIENT PRESENTING CLINICAL SIGNS**

Zoe Staffin Presented for left sided epistaxis, snoring, and swelling above left eye. No other abnormalities noted. Clinical signs started about 2 months ago. Had multiple teeth extracted on June 29th. Treatment with steroids and antibiotics did not help.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Normal

Canine **COMPUTED TOMOGRAPHY OF THE SKULL & THORAX**

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

**BREED** **COMPUTED TOMOGRAPHIC FINDINGS**

Border Collie Skull

The tooth elements 208-210 are absent.

**SEX** The nasal cavity bilaterally is obliterated by soft tissue attenuating and moderate contrast enhancing material. Advanced destruction of the associated conchal&turbinate structures is appreciated. The nasal soft tissue material is extending caudally into the frontal sinus bilaterally. The maxillary, nasal and frontal bone bilaterally present aggressive osteolytic lesions. The nasal soft tissue material is dissecting through the cribriform plate and is mildly bulging into the left rostral cranial fossa.

**AGE** 8 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.

In the rostral aspect of the left lateral ventricle, a strong contrast enhancing plaque like lesion is appreciated – following the outline of the left basal ganglion.

**HOSPITAL NAME** 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.  
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Thorax

**REFERRING VET** The bony and surrounding soft tissue structures are within normal limits.

Dr. Runde 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.

**INVOICE** The cardiovascular structures including the pulmonary vasculature are within normal limits.

52723 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.

**DATE** 7-6-22 In the left caudal lung lobe, a gas filled lesion, presenting a thin soft tissue capsule is noted, measuring 5 mm in diameter. The remainder of the lung parenchyma present the expected architecture and attenuation behavior with interspersed punctuate mineralization.



**PATIENT**

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

Zoe Staffin

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**SPECIES**

Canine

**BREED**

Border Collie

- Biologically aggressive nasal soft tissue neoplasia with polyostotic aggressive osteolytic lesions of the associated osseous structures
- Evidence of the nasal mass perforating the cranial fossa
- Intracranial extraaxial plaque like lesion rostral aspect left lateral ventricle
- Absent triadan 208-210
- Small bulla left caudal lung lobe
- Pulmonary osteomas
- No evidence of pulmonary metastatic disease

**SEX**

FS

**AGE**

8

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

There is a primary soft tissue neoplasia arising from the nasal cavity with polyostotic osteolytic lesions of the osseous structures of the nasal cavity. The nasal mass is dissecting through the cribriform plate into the cranial fossa. 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.

The plaque like lesion in the rostral aspect of the left lateral ventricle can present ependymitis or neoplasia originating from the choroid plexus (e.g. adenoma/carcinoma) or metastatic disease of the nasal mass.

**HOSPITAL NAME**

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**REFERRING VET**

Dr. Runde

**INVOICE**

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7-6-22



**PATIENT**

Zoe Staffin

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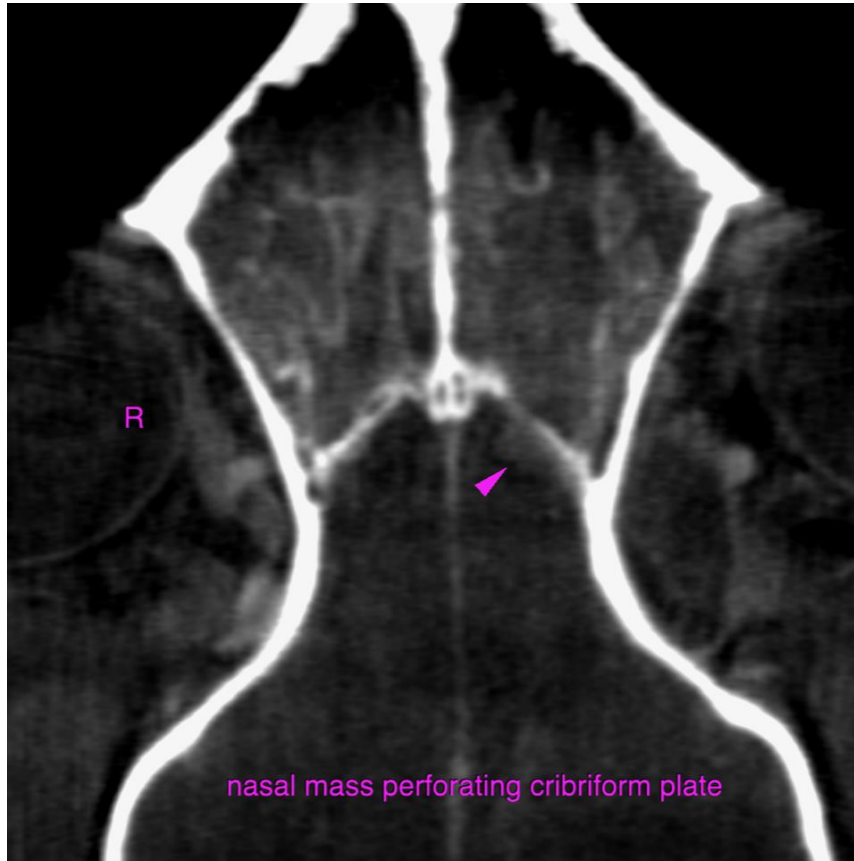
Dr. Runde

**INVOICE**

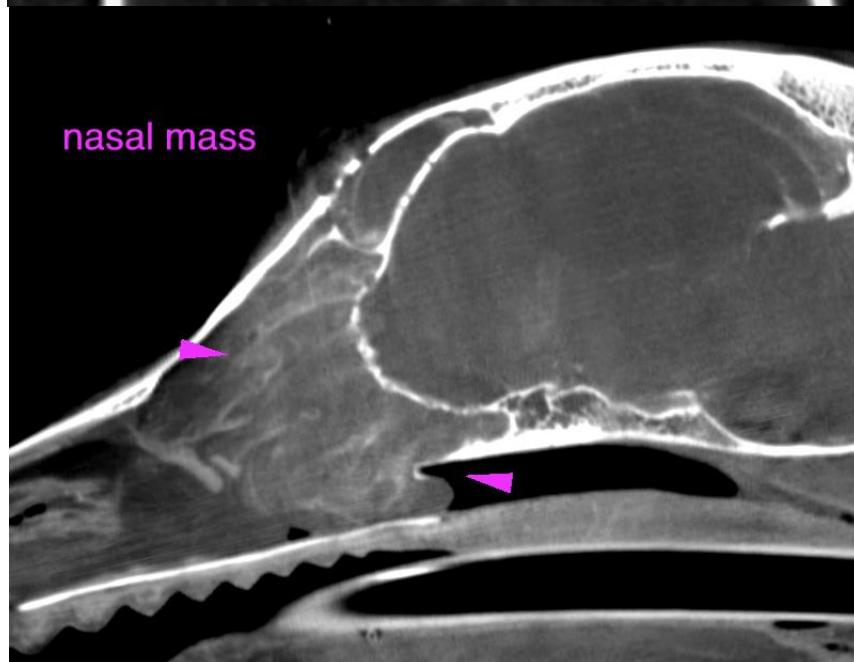
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nasal mass perforating cribriform plate



nasal mass



**PATIENT**

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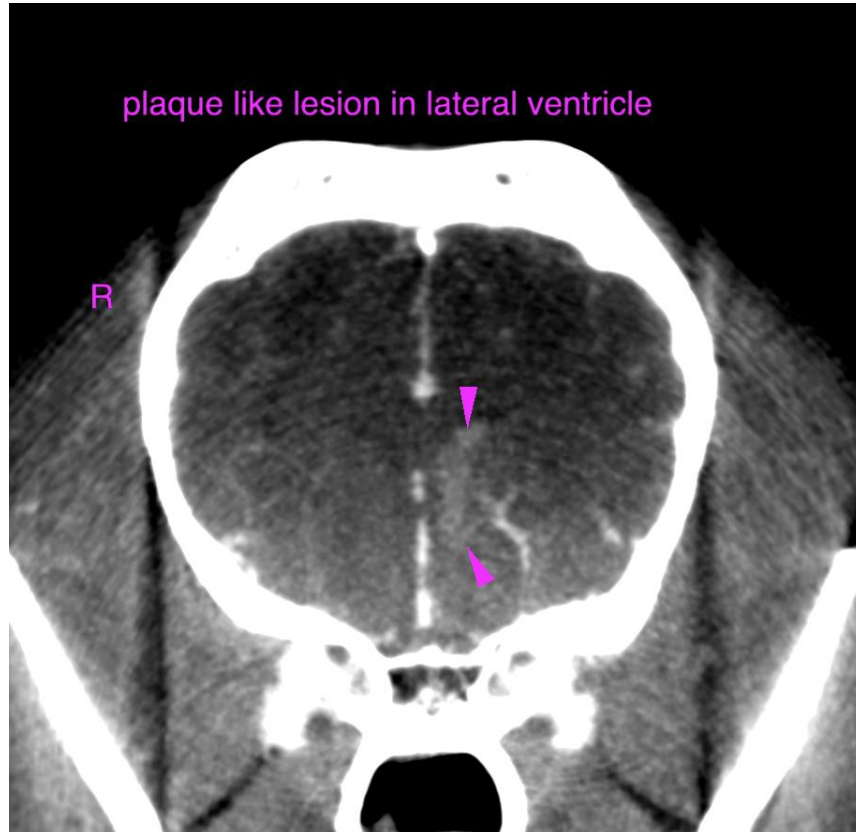
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
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