



PATIENT

Sissy Lewis

PRESENTING CLINICAL SIGNS

Sneezing, snoring, snorting, having trouble breathing through nose for the past ~4-5 months, progressively getting worse. Clear discharge from the right nostril. Left nostril appears completely occluded, right nostril is mostly occluded.

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE SKULL

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

BREED

Great Pyrenees Mix

COMPUTED TOMOGRAPHIC FINDINGS

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

SEX

Female Spayed

The nasal cavity is obliterated by an expansile, homogeneous soft tissue attenuating and mild contrast enhancing mass. Advanced destruction of the nasal conchal & turbinate structures bilaterally is appreciated. The osseous structures of the nasal cavity present multifocal moth eaten osteolytic lesions. Osteolysis with perforation of the cribriform plate is noted. The frontal sinuses contain soft tissue attenuating material, L>R. The osseous lining of the left front sinus presents moderate smooth hyperostosis and lytic lesions of the frontal bone bilaterally are appreciated.

AGE

11 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.

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

Mountain West
Veterinary Hospital

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

- Biologically aggressive nasal soft tissue mass with polyostotic aggressive osteolytic lesions of the associated osseous structures and perforation of the cranial fossa

REFERRING VET

Melanie Thompson

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

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The CT study is compatible with primary nasal neoplasia. Differentials include adenocarcinoma, squamous cell carcinoma, transitional cell carcinoma, osteosarcoma, lymphosarcoma, other. Rhinoscopy including biopsy can be used as advanced diagnostic test. 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.

DATE

8-17-22



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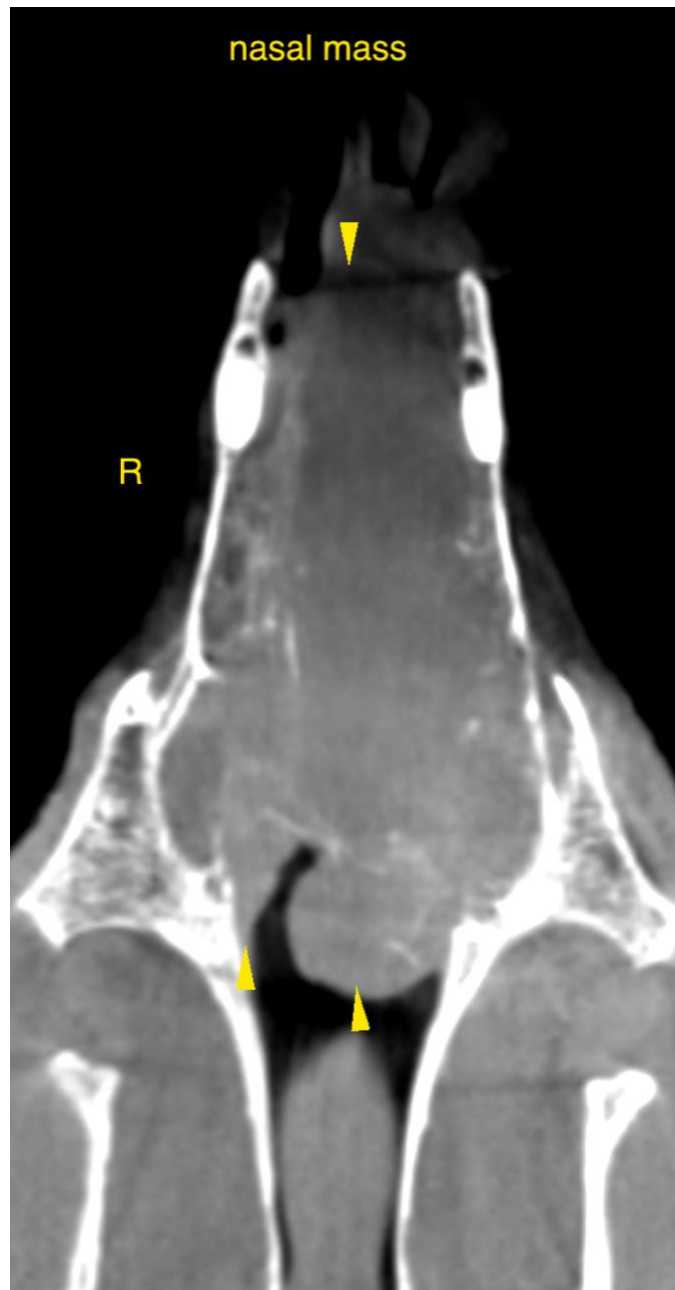
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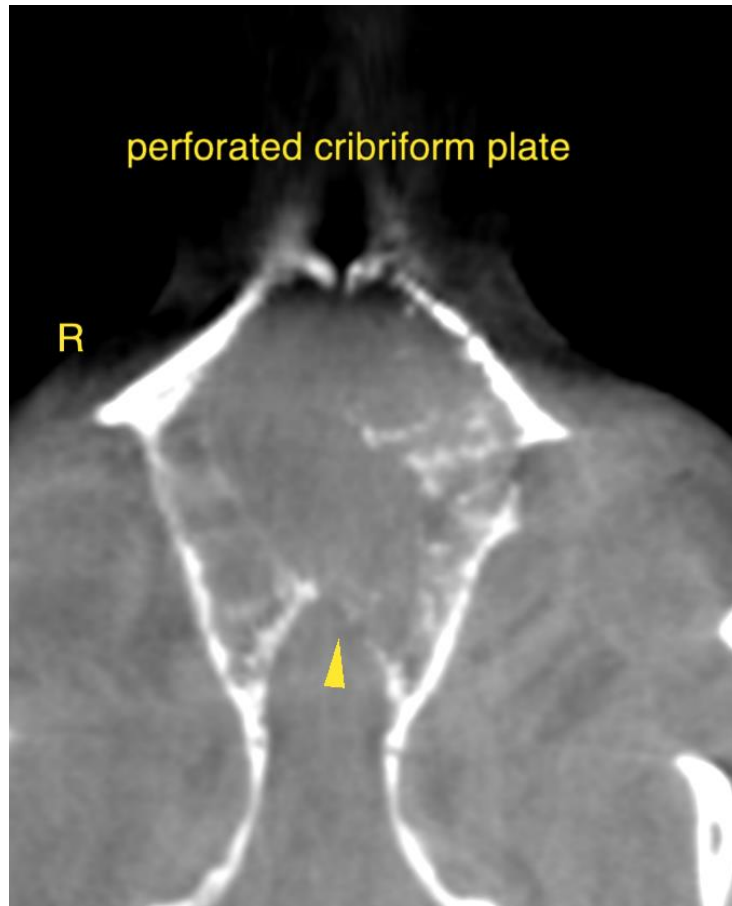
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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