

Diagnostic Imaging

Veterinary CT, Ultrasound & Teletology Services
veterinarian referral only

PATIENT

Luna Sulik

SPECIES

Canine

BREED

Beagle

SEX

Spayed Female

AGE

5 Years

WEIGHT

17 pounds

INTERPRETED BY

Tilde Rodrigues Froes,
DMV, MSc., Dr.
Med.Vet.,
Dipl.CBraRVet

IMAGING PERFORMED BY

SonoPath Imaging
Center

HOSPITAL NAME

Mt. Olive Veterinary
Hospital

REFERRING VET

Dr. Jones

INVOICE

14028

DATE

03/03/26

PRESENTING CLINICAL SIGNS

- chronic sneezing and nasal discharge
- recently finished Clindamycin post dentistry

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

A pre- and post-contrast CT study of the head are provided for review totaling 2 series. One pre-contrast series (bone algorithm). One post-contrast series (soft tissue algorithm)

COMPUTED TOMOGRAPHIC FINDINGS

HEAD

There is moderate, diffuse alveolar bone loss (resorption) involving the maxilla and mandible. Bone resorption is more pronounced in regions corresponding to absent teeth, including the maxillary canine teeth (Triadan 104 and 204) and the left mandibular incisors (Triadan 302 and 303).

Adjacent to the region of the absent right maxillary Triadan 104, there is a small defect consistent with oronasal communication.

There is moderate, multifocal fluid accumulation within the nasal cavities, more pronounced in the right mid-rostral nasal cavity. This region corresponds to an area of oronasal communication. Mild loss of turbinate architecture is observed locally. No contrast-enhancing intranasal mass or radiopaque foreign body is identified.

The nasal septum is midline and intact.

The cribriform plate is intact.

There is minimal fluid accumulation within the left frontal sinus. The right frontal sinus is normally aerated.

Minimal possible aggregated fluid is present within the dorsal nasopharynx; the nasopharyngeal lumen remains patent.

The right medial retropharyngeal lymph node is mildly enlarged compared to the contralateral side, with preserved contrast enhancement pattern.

The left medial retropharyngeal and mandibular lymph nodes are within normal limits.

The tympanic bullae are air-filled, with normal wall thickness and contour.

The external auditory canals are unremarkable.

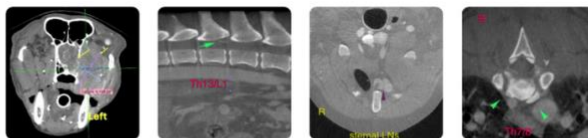
The globes and retrobulbar spaces are symmetric and within normal limits.

The temporomandibular joints are bilaterally congruent, with normal articular margins.

The mandibular, parotid, zygomatic, and thyroid glands are within normal limits.

No intracranial mass effect, falx cerebri deviation, or ventriculomegaly is observed.

COMPUTED TOMOGRAPHIC DIAGNOSIS



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141 Main St, Andover, NJ 07821

PATIENT

Moderate periodontal disease with alveolar bone resorption, more pronounced in areas of absent dentition. Differential diagnosis concurrent regional osteomyelitis.

Luna Sulik

The Triadan 104, 204, 302, and 303 are absent

SPECIES

Small oronasal fistula in the region of the absent right maxillary canine (Triadan 104) tooth.

Canine

Moderate multifocal rhinitis, more evident in the right mid-rostral nasal cavity, likely secondary to the oronasal communication. Differential diagnosis includes chronic non-specific rhinitis.

BREED

Beagle

Mild right medial retropharyngeal lymphadenomegaly, most consistent with reactive lymphadenitis.

Minimal left frontal sinus fluid accumulation, likely inflammatory.

SEX

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The tomographic findings demonstrate rhinitis, more localized in the region of the absent Triadan 104. Specifically, there is a small oronasal fistula at the site of the absent right maxillary canine tooth, accompanied by moderate periodontal disease and secondary inflammatory rhinitis.

AGE

5 Years

The distribution of nasal fluid accumulation, particularly within the right rostral nasal cavity, supports a secondary inflammatory process related to dental periodontal disease. However, other causes of chronic nonspecific rhinitis should also be considered, including lymphoplasmacytic rhinitis, allergic rhinitis, secondary bacterial, or less likely early infectious rhinitis.

WEIGHT

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There is no tomographic evidence of nasal neoplasia or severe destructive fungal rhinitis.

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Mild enlargement of the right medial retropharyngeal lymph node is most consistent with reactive lymphadenitis.

A dental evaluation and possible treatment are recommended.

If clinical signs persist following correction of the fistula, a nasal flush with cytology and culture is recommended to assess for secondary bacterial infection.

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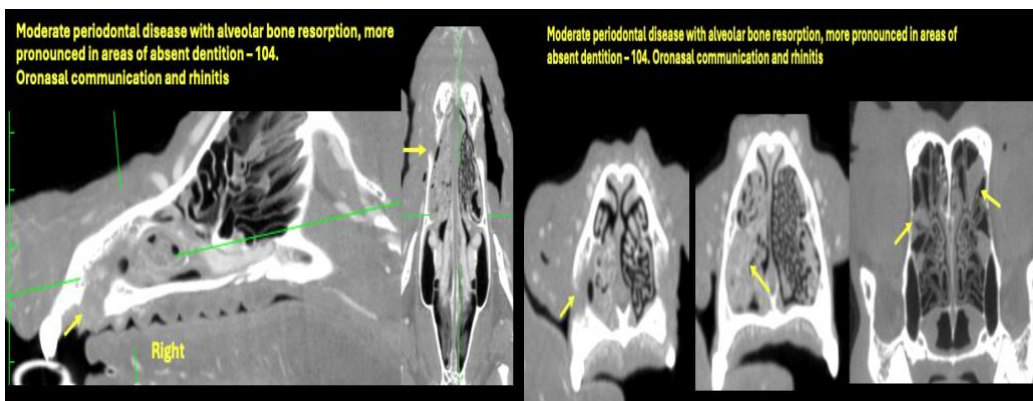
Dr. Jones

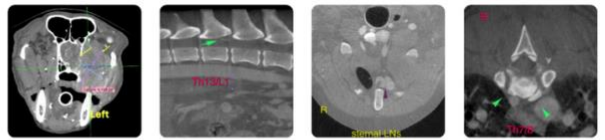
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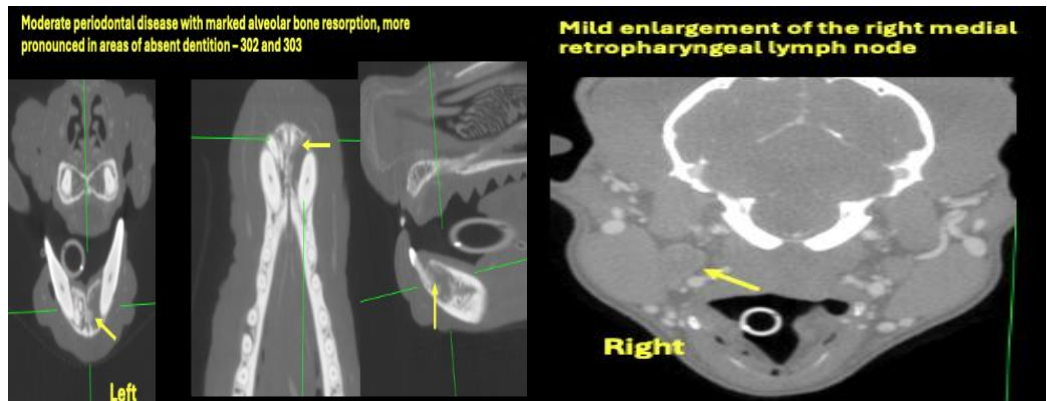
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Tilde Rodrigues Froes, DMV, MSc., Dr. Med.Vet., Dipl.CBraRVet
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