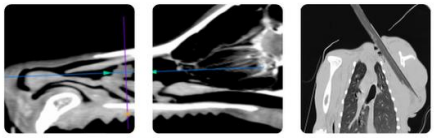

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Meala Kohut

SPECIES

Canine

BREED

Chihuahua

SEX

FS

AGE

11Y, 5M

WEIGHT

4.97kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Lucy

HOSPITAL NAME

Bridgwater Veterinary Hospital and Wellness Centre

REFERRING VET

Dr. Shapera

INVOICE

74060

DATE

3-5-26

PRESENTING CLINICAL SIGNS

- Started having seizures in September of 2025. Frequency and severity of seizures has been increasing despite increasing medications. Concern for intracranial lesion.

Abnormal PE/Chem/CBC/UA Results: WBC=17.8 x 10^9/L Neutrophils=12 x 10^9/L Alt=146 U/L GGT=15 U/L

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 of the head bone algorithm. One post-contrast series of the head, soft tissue algorithm.

COMPUTED TOMOGRAPHIC FINDINGS

A large, well-defined, rounded intra-cranial mass is identified within the right rostral cranial fossa, involving the region of the right olfactory bulb and extending into the right frontal lobe.

The lesion demonstrates heterogeneous contrast enhancement with a centrally hypoattenuating region and a thin peripheral enhancing rim. The mass measures approximately 2.0 × 1.9 × 1.9 cm.

There is mild thinning and focal osteolytic remodeling of the cribriform plate adjacent to the lesion. Moderate mass effect is present, characterized by leftward deviation of the falx cerebri.

The nasal cavities and turbinates are within normal limits, with no evidence of intranasal mass or turbinate destruction.

The oropharynx, nasopharynx, and soft palate are within normal limits.

The frontal sinuses are rudimentary, considered incidental.

The tympanic cavities and external auditory canals are within normal limits.

The globes and retrobulbar spaces are unremarkable.

Triadan 107, 205, 311, 406, and 411 are absent.

The temporomandibular joints are bilaterally congruent.

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

The mandibular, parotid, and zygomatic salivary glands are unremarkable.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Large contrast-enhancing intracranial mass centered in the right olfactory bulb and rostral frontal lobe, associated with central hypoattenuation, thinning of the cribriform plate with mild osteolysis, and contralateral deviation of the falx cerebri, consistent with a space-occupying lesion. Differential diagnoses include primary intracranial neoplasia (e.g., meningioma, glioma; less likely olfactory neuroblastoma) or intracranial metastasis. A focal form of granulomatous meningoencephalitis (GME) is considered less likely.

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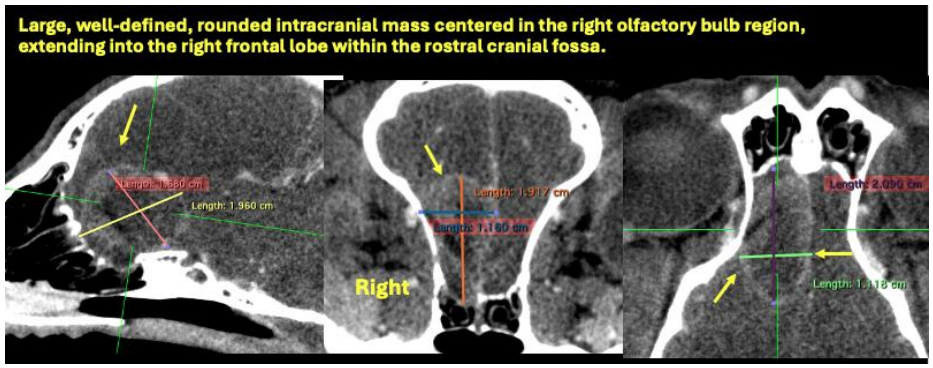
- Triadan 107, 205, 311, 406, and 411 are absent.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT examination demonstrates a large space-occupying intracranial lesion involving the right olfactory bulb and frontal lobe, producing a mild midline shift consistent with clinically significant mass effect.

The imaging appearance, particularly the rostrotentorial location and solitary nature, favors primary brain neoplasia.

Referral for neuro-oncology consultation may be considered to discuss confirmation diagnosis and therapeutic options.



The information and recommendations provided are based on the images presented by the referring veterinarian. 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
info@sonopath.com