



PATIENT

Nala Cushnier

SPECIES

Canine

BREED

Boxer Mix

SEX

Female Spayed

AGE

11Y

WEIGHT

71.4lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Burge

HOSPITAL NAME

Wilson Veterinary
Hospital

REFERRING VET

Dr. Ferrell

INVOICE

74439

DATE

4-1-26

PRESENTING CLINICAL SIGNS

- Acute sneezing, coughing, and nasal discharge starting 2/24/26.
- Chest radiographs revealed focal bronchopneumonia affecting the right middle lung lobe.
- Empirical therapies have been attempted without significant resolution, including doxycycline, azithromycin, prednisone, hycodan, and cerenia.
- Pet has had periods of hyporexia throughout treatment, but has maintained a consistent body weight.

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & THORAX

A pre- and post-contrast CT study of the head and thorax are provided for review totaling 4 series. One pre-contrast series of the head bone algorithm. One post-contrast series of the head, bone algorithm. One pre-contrast series of the thorax bone algorithm. One post-contrast series of the thorax bone algorithm.

COMPUTED TOMOGRAPHIC FINDINGS

HEAD

There is a moderate diffuse accumulation of hypoattenuating fluid material within the nasal cavities, more pronounced rostrally and ventrally. No turbinate destruction is identified. No evidence of paranasal bone osteolysis, hyperostosis, or radiopaque foreign material is seen.

The cribriform plate is intact. The frontal sinuses are unremarkable. The oropharynx, nasopharynx, and soft palate are within normal limits.

Triadan 108 and 204 are absent. There is focal periapical/alveolar bone lysis associated with root of Triadan 208.

No intracranial mass effect or midline shift is identified.

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

The globes and retrobulbar spaces are unremarkable.

The temporomandibular joints are bilaterally congruent.

The mandibular lymph nodes are within normal limits.

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

THORAX

The trachea and main bronchi are within normal limits.

There is a small focal gravity-dependent peripheral area of pulmonary consolidation in the right middle lung lobe. The remaining pulmonary parenchyma is unremarkable, with no evidence of pulmonary nodules, masses, or diffuse interstitial/alveolar disease.

The bronchial tree demonstrates normal branching and tapering. Bronchial walls are thin and smooth, with a normal bronchus-to-artery ratio.



PATIENT

Nala Cushnier

The cardiac silhouette and pulmonary vasculature are within normal limits. Contrast enhancement is adequate.

SPECIES

Canine

The sternal, cranial mediastinal, and tracheobronchial lymph nodes are within normal limits.

BREED

Boxer Mix

There is fusion of the fifth and sixth sternebrae with mild sternal malalignment, likely congenital/developmental.

SEX

Female Spayed

Mild spondylosis deformans is present at T1-T2 and T2-T3, characterized by incomplete ventral bridging osteophytes.

AGE

11Y

Moderate periarticular new bone formation is present in the right shoulder joint, with vacuum phenomenon and enthesophyte formation at the insertion of the biceps brachii tendon.

WEIGHT

71.4lbs

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Moderate bilateral nasal cavity hypoattenuating fluid accumulation without turbinate destruction or osseous lysis, most consistent with non-erosive nonspecific rhinitis.
- Periapical/alveolar bone lysis at root of Triadan 208, compatible with regional periodontal disease.
- Small focal peripheral consolidation in the right middle lung lobe, compatible with residual or focal bronchopneumonia, pulmonary fibrosis, and/or concurrent atelectasis.

INTERPRETED BY

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

Incidental/chronic osseous findings:

- Fusion of sternebrae 5 and 6 with mild sternal malalignment,
- Mild cranial thoracic spondylosis deformans
- Moderate right shoulder osteoarthritis/ biceps tendon enthesopathy.

IMAGING PERFORMED BY

Dr. Burge

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Wilson Veterinary
Hospital

The CT findings are consistent with mild-to-moderate, non-destructive, nonspecific rhinitis. Differential diagnoses include lymphoplasmacytic rhinitis, allergic rhinitis, and infectious rhinitis (with fungal rhinitis considered less likely).

REFERRING VET

Dr. Ferrell

Within the thorax, there is a small persistent focal pulmonary lesion in the right middle lung lobe, which may represent residual bronchopneumonia, focal pulmonary fibrotic change, and/or concurrent passive atelectasis.

INVOICE

74439

A nasal flush for cytology and culture should be considered for further diagnostic investigation.

DATE

4-1-26

Clinical and imaging follow-up may also be considered depending on the patient's response to treatment.

Additionally, a dental evaluation is recommended for Triadan 208.



PATIENT

Nala Cushnier

SPECIES

Canine

BREED

Boxer Mix

SEX

Female Spayed

AGE

11Y

WEIGHT

71.4lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Burge

HOSPITAL NAME

Wilson Veterinary
Hospital

REFERRING VET

Dr. Ferrell

INVOICE

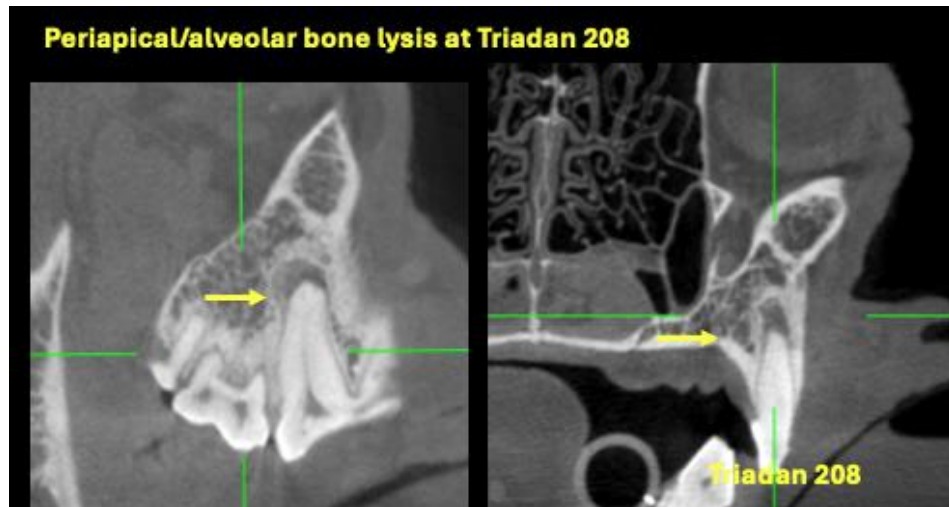
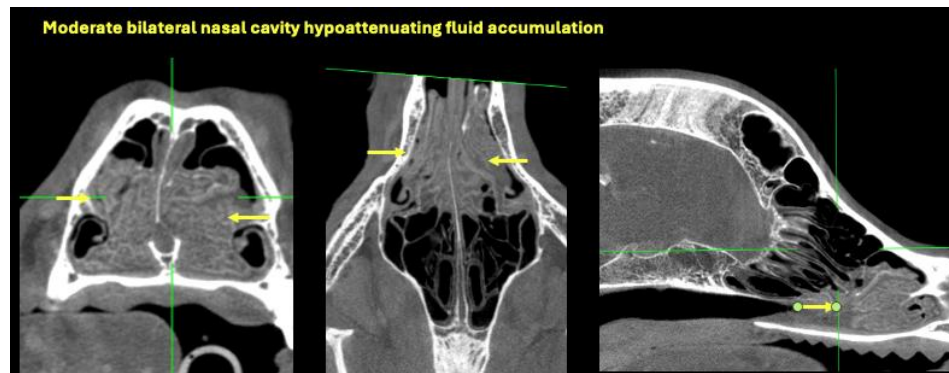
74439

DATE

4-1-26

TECHNICAL COMMENTS

The rostral-most aspect of the nasal planum/face (rostral to the level of Triadan 104) was not included in the field of view and therefore could not be assessed.





PATIENT

Nala Cushnier

SPECIES

Canine

BREED

Boxer Mix

SEX

Female Spayed

AGE

11Y

WEIGHT

71.4lbs

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Burge

HOSPITAL NAME

Wilson Veterinary
Hospital

REFERRING VET

Dr. Ferrell

INVOICE

74439

DATE

4-1-26

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