



## PATIENT

PC Peters

## SPECIES

Feline

## BREED

DHS

## SEX

Neutered Male

## AGE

9M

## WEIGHT

6lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Sidney

## HOSPITAL NAME

East Hill Animal  
Hospital

## REFERRING VET

Dr. Schang

## INVOICE

74710

## DATE

4-21-26

## PRESENTING CLINICAL SIGNS

Chronic URI  
treated with multiple rounds of antibiotics.

Abnormal PE/Chem/CBC/UA Results: chronic nasal discharge

## COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

A pre and post-contrast CT series of the head is provided for review totaling 3 series. One pre-contrast series bone algorithm. Two post-contrast series soft tissue algorithm.

## COMPUTED TOMOGRAPHIC FINDINGS

There is a moderate, multifocal, bilateral loss of nasal turbinate and conchal architecture, associated with diffuse hypoattenuating intranasal material and ill-defined mucosal thickening with contrast enhancement. The nasal septum is poorly defined.

There is sclerosis involving the right frontal bone, medial orbital wall, and the orbital plate of the ethmoid bone.

The frontal sinuses are filled with hypoattenuating fluid material. The ethmoid turbinates are also fluid-filled.

No evidence of lesion extension into the choana is observed.

The nasopharynx and soft palate are within normal limits, with no evidence of nasopharyngeal polyps.

The cribriform plate is intact.

The tympanic bullae and external auditory canals are unremarkable.

No intracranial mass effect or abnormal contrast enhancement is identified.

The globes and retrobulbar spaces are unremarkable.

The temporomandibular joints are bilaterally congruent.

All teeth are present, with no CT evidence of significant dental disease.

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

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

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Moderate, bilateral, rhinitis with turbinate loss, intranasal fluid accumulation, and mucosal enhancement, with associated loss of nasal septum definition and sclerosis of the adjacent craniofacial bones (right side predominance). Differential diagnoses include fungal rhinitis, chronic viral rhinitis with secondary bacterial infection, or chronic lymphocytic-plasmocytic rhinitis.
- Frontal and ethmoidal sinusitis.



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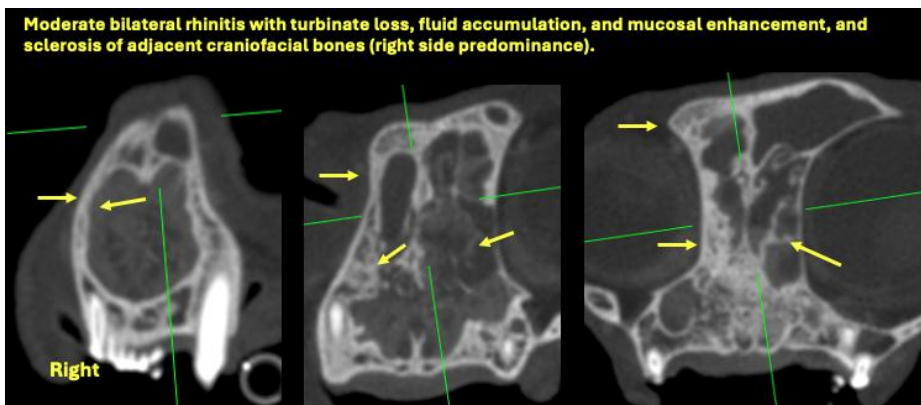
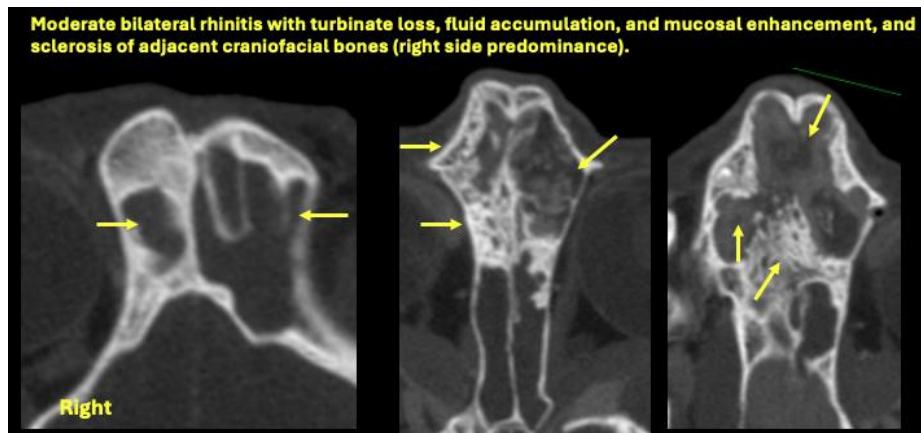
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The tomographic findings are consistent with a chronic, bilateral, mildly destructive rhinitis (nasal septum involvement) with concurrent sinus involvement. Differential diagnoses include for fungal disease (cryptococcosis or less commonly aspergillosis), chronic viral rhinitis (as it may also result in turbinate destruction and architectural distortion in chronic cases); and chronic lymphocytic-plasmacytic rhinitis.

A nasal flush with cytology, combined with bacterial and fungal cultures and a PCR panel for feline upper respiratory pathogens (FHV-1, calicivirus, and Mycoplasma spp.), is recommended as the next diagnostic approach. Serologic testing for fungal antigens may be performed concurrently. If results remain inconclusive, rhinoscopy with targeted biopsy is indicated for definitive



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](mailto:info@sonopath.com)