



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Archie Berluti	resented for investigation of chronic nasal signs.
<b>SPECIES</b>	Acute onset of paroxysmal forward sneezing, nasal irritation, and nasal discharge.
Canine	No coughing or reverse sneezing reported.
<b>BREED</b>	No relevant past medical history reported.
Daschund	- Otherwise EDDU normally and doing well.
<b>SEX</b>	Objective:
Male	CT scan: Deviation of the nasal septum to the right. Non-contrasting, mildly hyperattenuating material within the rostral right nasal cavity with loss of nasal turbinates.
<b>AGE</b>	Retrograde nasopharyngoscopy: Mild mucoid material in the nasal cavity. No overt major changes.
6	Antegrade rhinoscopy: Loss of turbinates on the right side. Mucoid build-up between both nostrils.
<b>WEIGHT</b>	Mildly erythematous nasal mucosa. No foreign body visualised.
6.3	Biopsies from left and right nasal mucosa submitted for histopathology and culture.
<b>INTERPRETED BY</b>	The nasal cavities were flushed vigorously.
Tilde Rodrigues Froes, DMV, MSc., Dr. Med Vet., Dipl. CBraRVet	Recovered well from anaesthetic.
<b>IMAGING PERFORMED BY</b>	<b>COMPUTED TOMOGRAPHIC STUDY OF THE HEAD</b>
Eamon	A pre- and post-contrast CT study of the head was provided for review, totaling two series: one pre-contrast series of the head (bone algorithm) and one post-contrast series of the head (soft tissue algorithm). Additionally, four CT series of the thorax and abdomen were provided.
<b>HOSPITAL NAME</b>	<b>COMPUTED TOMOGRAPHIC FINDINGS</b>
Belconnen Veterinary Centre	Within the rostral right nasal cavity, at the level of Triadan 104 – 106 (predominantly centered on Triadan 104), there is a focal, unilateral, ventrally distributed accumulation of hypoattenuating fluid material with thin peripheral contrast enhancement. This region is associated with loss of normal nasal turbinate architecture and mild turbinate atrophy extending caudally. The lesion measures approximately 2.2 cm in rostrocaudal extension.
<b>REFERRING VET</b>	Concurrently, a focal area of osseous lysis affects the adjacent alveolar bone and ipsilateral hard palate, centered at the level of Triadan 104 are noted. An oronasal communication is present at this location, consistent with an oronasal fistula. The affected tooth (Triadan 104) appears structurally intact.
Eamon	There is mild deviation of the nasal septum toward the right side.
<b>INVOICE</b>	No evidence of a nasal foreign body is identified.
74816	The remaining portions of the right nasal cavity (caudal aspect) and the entire left nasal cavity are within normal limits, with preserved turbinate architecture.
<b>DATE</b>	The frontal sinuses are normally aerated.
4-29-26	The cribriform plate is intact.
	The nasopharynx, oropharynx and soft palate are within normal limits.
	The tympanic cavities are air-filled with normal wall thickness. Normal external ear canals.
	The globes and retrobulbar spaces are unremarkable.



## PATIENT

Archie Berluti

## SPECIES

Canine

## BREED

Daschund

## SEX

Male

## AGE

6

## WEIGHT

6.3

## INTERPRETED BY

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

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Eamon

## HOSPITAL NAME

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## REFERRING VET

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The brain parenchyma is normal in attenuation, with no evidence of mass effect or midline shift.

The mandibular, retropharyngeal, and other regional lymph nodes are within normal limits.

The salivary glands (mandibular, parotid, and zygomatic) are symmetric and unremarkable.

The temporomandibular joints are bilaterally incongruent.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Focal lesion in the rostral right nasal cavity characterized by fluid accumulation, regional turbinate destruction and adjacent alveolar bone and hard palate lysis centered at Triadan 104, with formation of an oronasal fistula. Differential diagnoses include periodontal disease with secondary oronasal fistulation and localized infectious/inflammatory rhinitis. However, due to the absence of additional lesions affecting other teeth, early-stage neoplasia (e.g., dental neoplasia) should also be considered, or less likely, a primary nasal neoplasm.
- The temporomandibular joints are bilaterally incongruent.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The tomographic findings demonstrate a nasal focal fluid accumulation, mild destructive process centered at Triadan 104, resulting in alveolar bone and hard palate lysis with secondary oronasal fistula formation and adjacent nasal cavity involvement.

The primary consideration is a localized odontogenic process, such as periodontal disease complicated by oronasal fistulation and secondary infectious/inflammatory rhinitis. However, the absence of significant periodontal changes affecting additional teeth raises concern for an alternative underlying etiology, including early-stage dental neoplasia. A primary nasal neoplasm is considered less likely given the lesion's focal dental epicenter and distribution.

Histopathological evaluation and culture, already obtained, are essential for definitive diagnosis and appropriate therapeutic planning.

Correlate with a detailed dental examination. Await histopathology and microbiological results to guide diagnosis and treatment. If results are inconclusive or clinical progression occurs, further investigation for neoplastic disease is advised.





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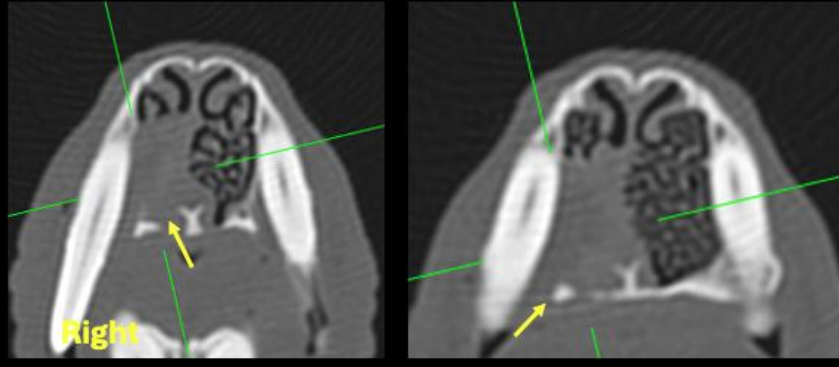
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## DATE

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**Right rostral nasal lesion at Triadan 104 with turbinate loss, hard palate bone lysis, and oronasal fistula.**



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.

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