



## PATIENT

Chewie Neener

## SPECIES

Canine

## BREED

Labradoodle

## SEX

FS

## AGE

10Y, 10M

## WEIGHT

65lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

C Fisher

## HOSPITAL NAME

Pine Creek Veterinary  
Hospital

## REFERRING VET

Cristy Fisher

## INVOICE

74844

## DATE

4-30-26

## PRESENTING CLINICAL SIGNS

2 month history of sneezing with nasal discharge - initially was serous discharge and now serosanguinous discharge. Significant reverse sneezing and mild dyspnea now. Over the last 2 months has develop a progressively worsening cough as well.

Abnormal PE/Chem/CBC/UA Results: Mild serosanguinous nasal discharge bilaterally. CBC unremarkable. Moderate ALKP elevation (579 U/L) UPC 0.5 Thoracic radiographs taken 2/2026 and 3/2026 are unremarkable.

## COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

A pre- and post-contrast CT study of the head is provided for review, comprising four series acquired in sagittal, dorsal, and transverse planes, using both soft tissue and bone algorithms.

## COMPUTED TOMOGRAPHIC FINDINGS

There is a moderate volume of hypoattenuating fluid material within the nasal cavities, more pronounced on the right side and in the rostral to mid portions. Mild loss of turbinate definition is present. No evidence of focal mass effect or radiopaque foreign material is identified in the nasal cavities.

The nasal septum and hard palate are unremarkable. The paranasal bones show normal attenuation and architecture, with no evidence of osteolysis or hyperostosis. The cribriform plate is intact.

At the rostral aspect of the choanae, there is accumulation of hypoattenuating, mildly heterogeneous fluid material with a foamy appearance.

The mid-caudal nasopharynx and soft palate are within normal limits.

The globes and retrobulbar spaces are unremarkable.

Triadan 101 is absent. The remaining dentition and adjacent alveolar bone structures are within normal limits.

No additional abnormalities are identified in the evaluated cranial and facial structures.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Moderate bilateral (right-sided predominance) non-destructive rhinitis characterized by intranasal fluid accumulation and mild turbinate detail loss. Primary differential diagnosis includes chronic inflammatory rhinitis (idiopathic-lymphoplasmacytic, infectious with secondary bacterial rhinitis, less likely early phase fungal disease.
- Due to the focal accumulation of foamy material at the choanal region, the presence of discrete, non-radiopaque foreign material admixed within this content cannot be completely excluded.
- Triadan 101 is absent

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The imaging findings support a non-destructive inflammatory rhinitis, most consistent with chronic idiopathic or lymphoplasmacytic rhinitis, with possible secondary bacterial involvement.



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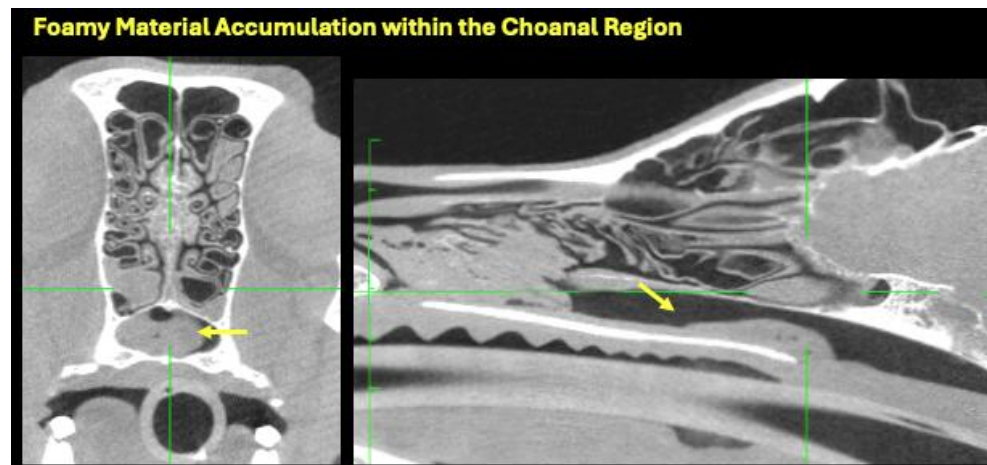
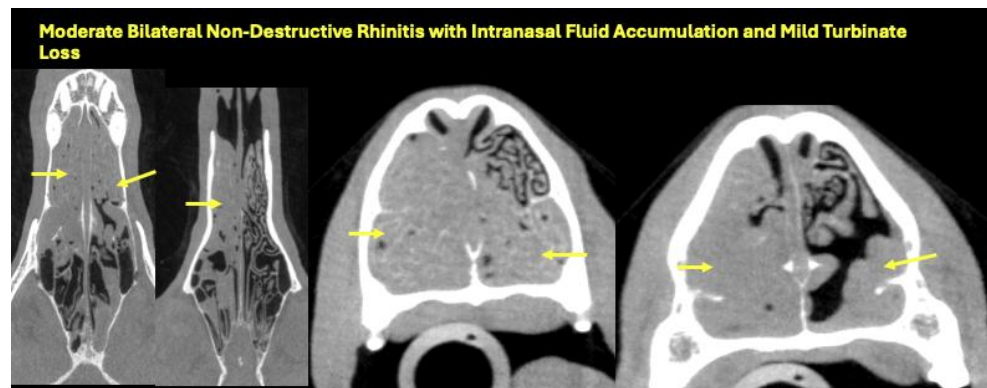
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The presence of foamy material within the choanal region raises the possibility of retained secretions or, less likely, a small non-radiopaque foreign body.

Initiating with a targeted nasal flush is recommended, particularly directed to the caudal nasal cavity and choanal region, for both diagnostic and potential therapeutic purposes.

If clinical signs persist or if the findings remain inconclusive, rhinoscopy should be considered for direct visualization and further assessment. Especially following the nasal flush, repeat computed tomography may be considered to evaluate for progression or resolution of the foamy retained material.



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  
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