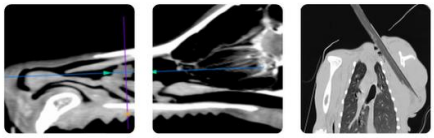


PATIENT

Benji Parker

SPECIES

Canine

BREED

Jack Russell Terrier Mix

SEX

Male Neutered

AGE

14Y, 9M, 26D

WEIGHT

28.20lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Megan Presutti, DVM

HOSPITAL NAME

Catskill Veterinary Services, PLLC

REFERRING VET

Megan Presutti, DVM

INVOICE

75128

DATE

5-26-26

PRESENTING CLINICAL SIGNS

Benji presented for Dental Cleaning.
Any Concerns: Yes: nasal polyp/ deformity, gave a nebulizer treatment, was wondering if we could send this ct out to have it checked. Skin tag on the right eye.
Any Abnormal Behavior?: water intake increased
Any medications and/or supplements: fluoxetine 20mg, GABAPENTIN 100MG CAPSULES gave 2 in the morning
What time were medications given?: 6:30 AM
Last Meal?: 6 pm
Pet's diet: Acrenia, fresh chicken sweet potato
Appetite: normal
Abnormal PE/Chem/CBC/UA Results: PE: Oral Cavity: Moderate tartar accumulation. Cardiovascular: Gr. IV/VI murmur present Integument: Multiple small cutaneous masses, skin tags present CBC: Monocytes 0.78 K/µL Chem: ALT 180 U/L, ALP 526 U/L, Lipase 261 U/L, Creatine Kinase 221 U/L Oral/Dental Assessment: Extracted: NONE Missing: NONE Pocketing: 101 Tartar gr. 3 Plaque gr. 2 Gingivitis gr. 2 Periodontal disease gr. 3

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Single non-contrast CT study of the head is provided for review. Transverse images, bone algorithm.

The right side was identified based on an external marker mentioned by the technician. The lateral markers of the CT examination are inverted.

COMPUTED TOMOGRAPHIC FINDINGS

HEAD

There is a regional accumulation of hypoattenuating fluid/soft tissue material within the right nasal cavity, predominantly involving the ventral, middle to caudal aspects and ventral nasal cavity, measuring approximately 1.1 × 3.0 × 1.9 cm. This lesion is associated with regional loss of turbinate definition and mild distortion/protrusion toward the right choana.

The cribriform plate and nasal septum remain intact. No evidence of paranasal bone osteolysis or aggressive osseous proliferation is observed.

The remaining portions of the right nasal cavity are relatively preserved.

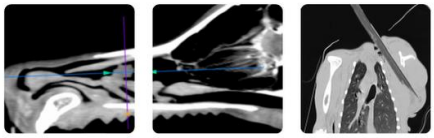
A small amount of hypoattenuating fluid material is also present within the left nasal cavity without associated turbinate destruction.

The frontal sinuses are within normal limits.

Focal alveolar bone resorption is present adjacent to teeth 301 and 302. Suspected root fracture and/or root resorption is noted involving tooth 302.

Suspected enamel fractures are present involving teeth 206, 306, 307, and 406.

There is a complex root fracture involving tooth 410.



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

The globes and retrobulbar spaces are within normal limits.

No evidence of enlarged lymph nodes.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Regional fluid/soft tissue attenuation accumulation within the right ventral middle-to-caudal nasal cavity and ventral nasal cavity associated with mild regional turbinate loss and mild extension toward the right choana. Differential diagnoses include chronic inflammatory rhinitis with accumulated secretory material, or inflammatory polypoid tissue and less likely early nasal neoplasia
- Mild fluid accumulation within the left nasal cavity without turbinate destruction, likely representing mild fluid accumulation, or mild inflammatory rhinitis.
- No CT evidence of cribriform plate destruction or aggressive osseous invasive disease.

Multifocal dental disease including:

- Focal alveolar bone loss adjacent to teeth 301 and 302, periodontal disease.
- Suspected root fracture and/or root resorption involving tooth 302.
- Suspected enamel fractures involving teeth 206, 306, 307, and 406
- Complex root fracture involving tooth 410.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The tomographic findings support a regional chronic inflammatory nasal process predominantly affecting the right nasal cavity. The regional turbinate effacement is mild and localized, without evidence of aggressive bone destruction or cribriform plate involvement. These findings are more compatible with chronic rhinitis and/or inflammatory polypoid material with retained secretions.

Although neoplasia is considered less likely based on the preserved cribriform plate and absence of aggressive osseous changes, early neoplastic disease cannot be completely excluded by imaging alone.

Correlation with rhinoscopic evaluation, cytology, culture, and nasal flush biopsy or biopsy is recommended for definitive characterization of the intranasal material.

TECHNICAL COMMENTS

The right side was identified based on an external marker mentioned by the technician. The lateral markers of the CT examination are inverted.

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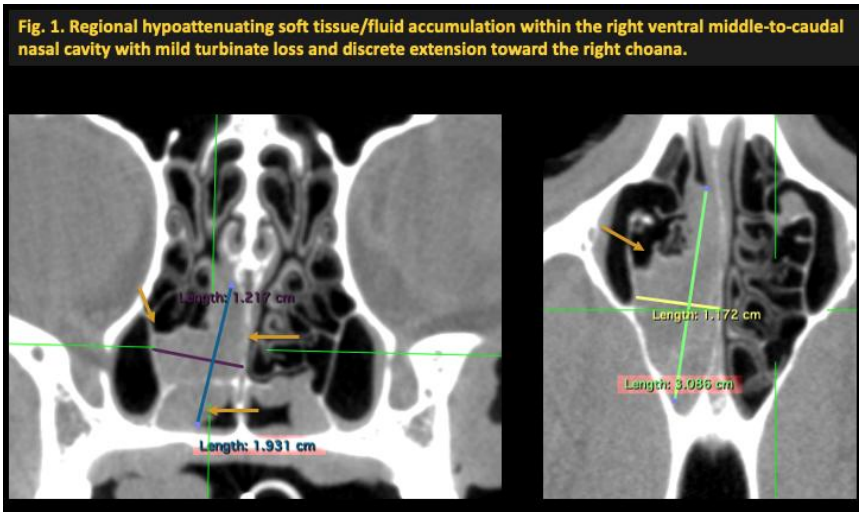

Fig. 1. Regional hypoattenuating soft tissue/fluid accumulation within the right ventral middle-to-caudal nasal cavity with mild turbinate loss and discrete extension toward the right choana.

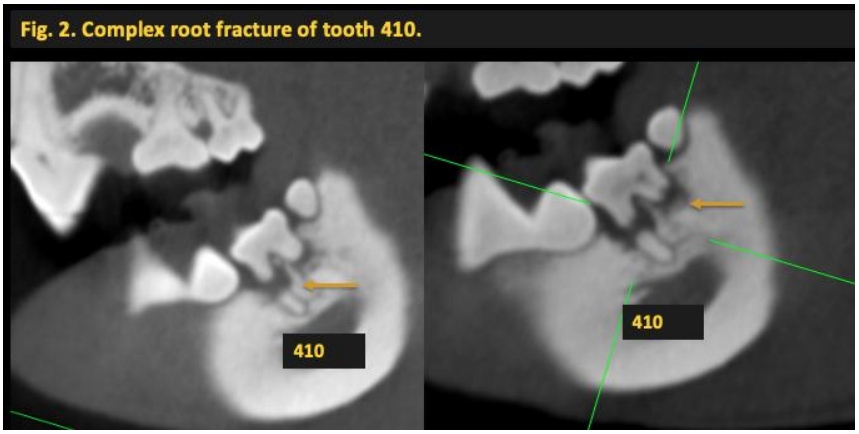

Fig. 2. Complex root fracture of tooth 410.

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