



PATIENT PRESENTING CLINICAL SIGNS

Gracie McKie Has been having nose bleeds off and on since June. August 15th - profusely bleeding with clots present. Usually coughs/sneezes a lot before bleeding starts. Stage 2 dental disease – no teeth that could obviously be causing the issue but cant be ruled out without dental xrays. Grade IV heart murmur – has been to Schott in 2022 and scheduled for July 2023 for another abdominal and thoracic ultrasound.

SPECIES

Canine Abnormal PE/Chem/CBC/UA Results: CBC and Coags rechecked Aug 15th - WNL. HCT 40%. Enlarged liver on xrays in mid June – ALP is increased – have been wondering about Cushing’s for a year – owner has not agreed to Cushing’s test (Adrenals were normal sized last year at ultrasound)

BREED

Poodle

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD AND THORAX

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

SEX

FS

COMPUTED TOMOGRAPHIC FINDINGS

HEAD

AGE
10 Years

A moderate to severe hypoattenuating fluid accumulation is completely filling the left nasal cavity multifocally and partially filling the right nasal cavity. Concurrently in the mid portion of the left nasal cavity, a more exacerbated and regional turbinate destruction is seen mimicking a hypoattenuating mass effect surrounded by the fluid accumulation. In the other areas of the nasal cavities, there is enhancing and swelling of the well-preserved nasal turbinates.

INTERPRETED BY

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

The lesions in the left nasal cavity cause a mild expansive aspect in the adjacent osseous bone structures, and a minor multifocal osteolytic change is seen in the ipsilateral frontal bone with mild hyperostosis.

HOSPITAL NAME

Bridgwater Veterinary Hospital and Wellness Centre

There is mild asymmetry between the nasal, frontal, and cribriform plate osseous structures in comparison with both sides of the skull. In addition, there is focal thinning of the dorsal and left portion of the cribriform plate; however, no evidence of meningeal enhancement.

There is no septum deviation or osteolytic changes in the bony nasal septum.

The left frontal sinus is completely filled by hypoattenuating fluid material.

REFERRING VET

Dr. P. Mander

The left maxillary sinus is completely filled by hypoattenuating fluid material.

The right frontal sinus and choana are partially filled by hypoattenuating fluid material.

The bulla cavities and external auditory canals are normal.

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No mass effect is seen in the brain, normal attenuation.

The temporomandibular joints are bilaterally congruent.

The fascial, cervical, and head muscle mass is symmetrical, and unremarkable.

DATE

8-16-23



PATIENT

Gracie McKie
 The globes and retrobulbar spaces are unremarkable.
 All teeth are present. No evidence of alveolar bone reabsorption, or oronasal fistula.

SPECIES

Canine
 The medial retropharyngeal lymph nodes and mandibular lymph nodes are unremarkable.
THORAX

The trachea is normal in luminal diameter and position.

BREED

Poodle
 The lumen of the main bronchus is normal.

There is mild reduction of the lung volume expansion and ground glass attenuation in the dorsal dependent caudal lung lobes. The remaining pulmonary parenchyma presents with normal pulmonary attenuation, no evidence of soft tissue nodules.

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 The cardiac silhouette and pulmonary vessels are normal. The contrast media adequately fills the cardiac chambers and vessels on post-contrast series.

AGE

10 Years
 The tracheobronchial lymph nodes are normal.
 The sternal, mediastinal, and cranial mediastinal lymph nodes are unremarkable.
 The pleural space and diaphragm are normal.

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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Chronic destructive rhinitis predominantly and more severely at the left side, associated with more regional fluid accumulation mimicking mass effect in the mid portion of the left nasal cavity, a minor focus of osteolytic changes in the left frontal bone, hyperostosis, and thinning of the left dorsal cribriform plate. The differential diagnosis includes severe destructive rhinitis, fungal rhinitis, or neoplasm process.
- Bilateral, concurrent, and more left-side sinusitis.
- There is mild asymmetry between the nasal, frontal, and cribriform plate bone structures between both sides. The differential diagnosis includes individual variation, correlated to congenital abnormalities, or previous early trauma.
- Dorsal dependent pulmonary passive atelectasis, no evidence of pulmonary metastatic disease.
- Otherwise, normal thorax.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The nasal (> left side) tomographic findings are correlated to the presented clinical signs of chronic nasal bleeding. In this case, it is difficult to distinguish severe destructive rhinitis such as fungal rhinitis, lymphocytic-plasmocytic, eosinophilic rhinitis from neoplasm process due to an ill-defined hypoattenuating area mimicking a mass effect in the mid-left nasal cavity, and consequent minor osteolytic changes and thinning of the left side cribriform plate. The possible neoplasm process in the differential diagnosis includes lymphoma, squamous cell carcinoma, chondrosarcoma.

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PATIENT The asymmetry of the nasal bones leads to impaired airflow, and such patients can present recurring rhinitis.

Gracie McKie

Nasal flush biopsy is suggested and required for final diagnosis.

SPECIES A cardiac echo is more accurate to evaluate the cardiac chambers and is suggested for further assessment of cardiac morphology due to the presence of detected cardiac murmur.

Canine

BREED

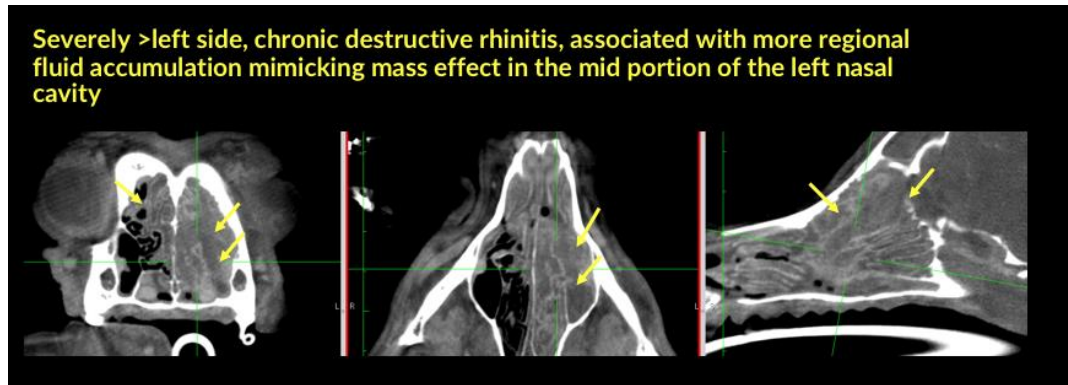
Poodle

SEX

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AGE

10 Years



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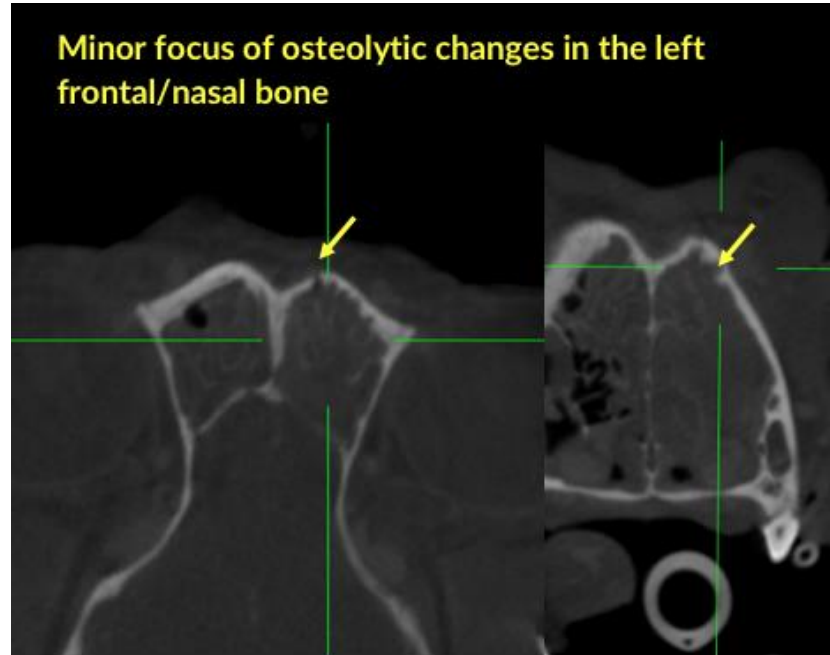
Tilde Rodrigues Froes,
DMV, MSc., Dr. Med
Vet., Dipl. CBraRVet

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and Wellness Centre

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PATIENT

Gracie McKie

SPECIES

Canine

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DMV, MSc., Dr. Med
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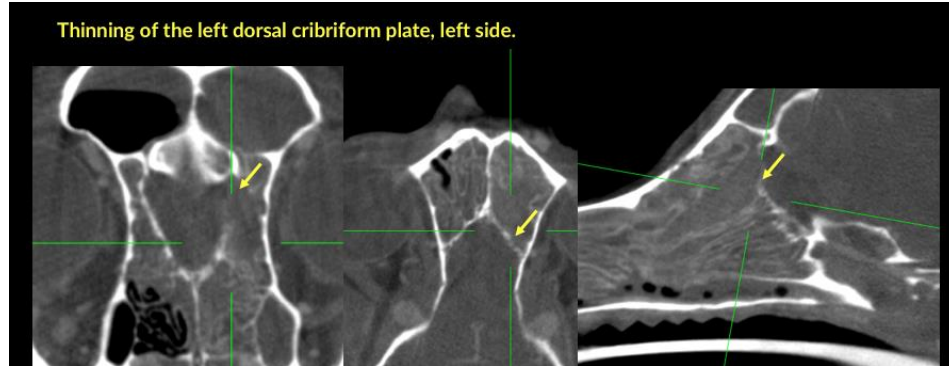
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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