



PATIENT PRESENTING CLINICAL SIGNS

Max Laviska Has been coughing and vomiting for several months but lately vomiting daily and trying to clear his throat. Radiographs were performed of the pharyngeal and thoracic region which revealed a pharyngeal mass. A cranial mediastinal mass was also seen. Eating ravenously. Drinking well.

SPECIES COMPUTED TOMOGRAPHIC STUDY OF THE HEAD, NECK, THORAX, & ABDOMEN

Feline Plain and post contrast studies available for review.

BREED COMPUTED TOMOGRAPHIC FINDINGS

DSH **Head & Neck**

An ovoid hypoattenuating uniformly enhancing mass is seen within the right nasopharynx. The mass appears to be attached to the caudal margin of the soft palate/palatinal veil to the right of midline and measures approximately 5mm in diameter.

SEX

Neutered Male The regional lymph nodes including the retropharyngeal and submandibular lymph nodes present within normal limits.

AGE

16 Years Both lobes of the thyroid gland are seen and present within normal limits.

Thorax

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

One of the cranial mediastinal lymph nodes in the craniodorsal mediastinum is moderately enlarged and measures 10 x 7mm. The lymph node is well delineated. The enhancement is uniform. The remainder of the mediastinal and tracheobronchial lymph nodes present within normal limits.

HOSPITAL NAME

Aloha Pet & Bird
Hospital

Multifocal saccular bronchiectasis is seen throughout the right and left lung. Extensive multiple saccular bronchiectasis and bullous emphysema of the right caudal lung lobe is noted as well. There are multiple subpleural and interstitial bands.

Abdomen

Multiple small cystic lesions are seen within the hepatic parenchyma.

REFERRING VET

Dr. Pepen

The gallbladder presents within normal limits.

The pancreas and adrenal glands present within age related normal limits. Mild dilation of the pancreatic duct is noted.

INVOICE

56000

The kidneys present within age related normal limits.

One sublumbar aortic lymph node is enlarged and measures 5mm in diameter.

DATE

1-3-23

A bates body is seen in the cranial abdomen to the left of the midline and considered an incidental finding.



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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Nasopharyngeal soft tissue mass meeting neoplastic criteria.
- Single cranial mediastinal lymphadenomegaly.
- Chronic bronchopulmonary disease with multifocal saccular bronchiectasis and bullous emphysema within the right caudal lung lobe.
- Multiple small cystic liver lesions compatible with biliary cyst adenomas.
- Single sublumbar aortic lymphadenomegaly in the abdomen.
- Suspect benign biliary cyst adenomas.
- Bates body.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT study confirms presence of a soft tissue mass at the caudal margin of the soft palate within the nasopharynx. Differential diagnosis includes neoplasia such as round cell neoplasia or soft tissue sarcoma. Granuloma cannot be ruled out entirely but is thought by far less likely.

Differential diagnosis for the single mediastinal and abdominal lymphadenomegaly includes reactive hyperplasia versus neoplastic infiltrate including metastatic disease. Unfortunately, these lymph nodes are not well accessible for ultrasound guided or other sampling.

The findings of the lung suggest presence of chronic bronchopulmonary disease such as allergic lower airway syndrome or infectious bronchitis with development of bronchiectasis and mucus plugging as well as bullous emphysema within the right caudal lung lobe. Interstitial pulmonary disease with traction bronchiectasis and reduced pulmonary compliance cannot be ruled out entirely as well. Further definition by means of airway endoscopy with airway sampling could be considered depending on the clinical correlation.



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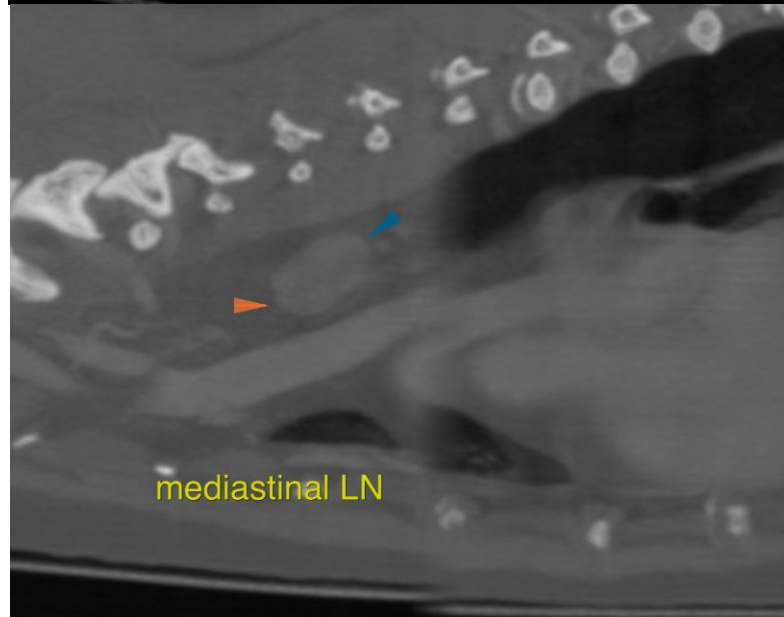
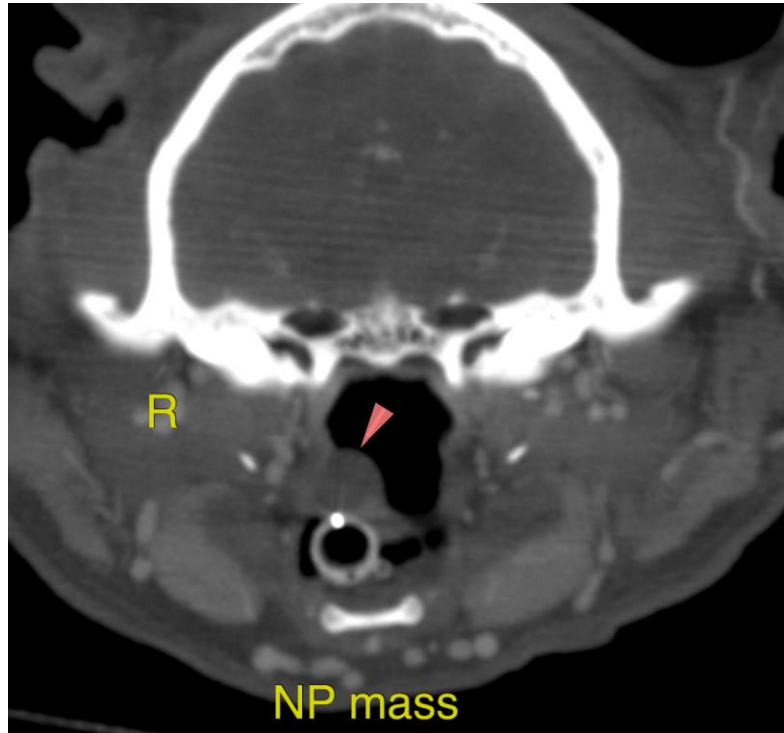
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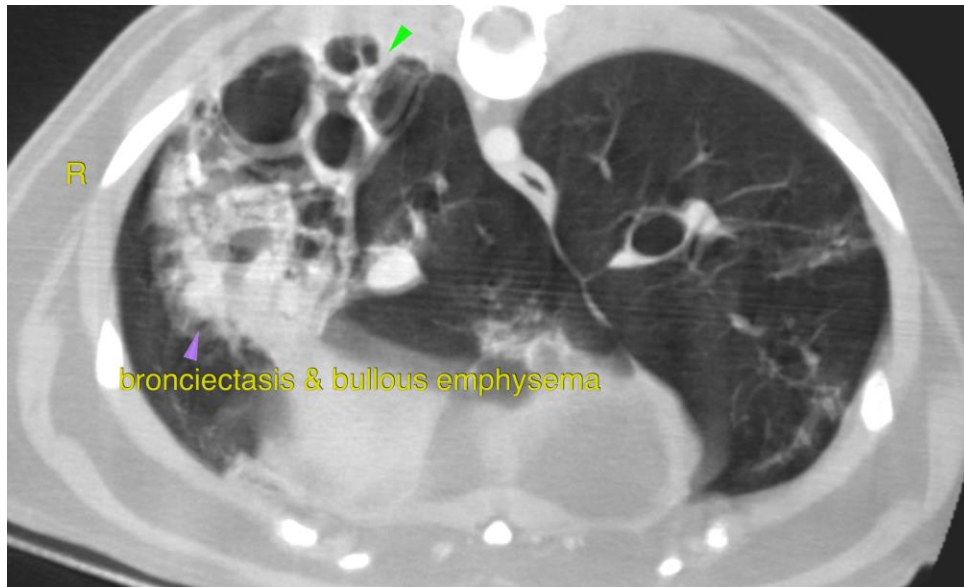
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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