


PATIENT PRESENTING CLINICAL SIGNS

Mitters Mallay Mitters presented for upper respiratory noises which started about 1 month ago. No respiratory distress has been observed and noises resolved once cat was placed on prednisone. The referring DVM performed a sedated oral examination and was concerned about a defect in the palate. (Note: the DVM notes state hard palate but the owner reports the defect was seen in soft palate)

SPECIES

Feline

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & THORAX

Post-contrast studies available for review.

BREED

DSH

COMPUTED TOMOGRAPHIC FINDINGS
Head

The brain presents no deviation from normal anatomy and symmetry. The grey and white matter distinction and the neuroparenchymal attenuation are as expected. The distribution of contrast enhancement is within normal limits throughout the parenchyma and meninges. The ventricular system is non-dilated and within the limits of the expected volume and symmetry.

SEX

Spayed Female

Thin and smoothly folded conchae and turbinates with even smooth mucosal lining.

AGE

6 Years

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

A 13 mm x 6 mm x 9 mm sized uniformly soft tissue attenuating mass with broad base to the nasopharyngeal roof is seen obstructing the nasopharynx, level with and just cranial of the tympanic bullae. Mild peripheral contrast enhancement is seen. The mass appears to connect to the left tympanic bulla.

INTERPRETED BY

 Nele Eley (Ondreka),
 DVM Dr. med. vet.,
 DipECVDI

The external auditory meatuses present within normal limits.

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

HOSPITAL NAME

 Animal Surgical
 Center

The salivary glands present within normal limits.

The visible dentition within normal limits.

REFERRING VET
Thorax

The bony and surrounding soft tissue structures are within normal limits.

Wantangh AH

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

INVOICE

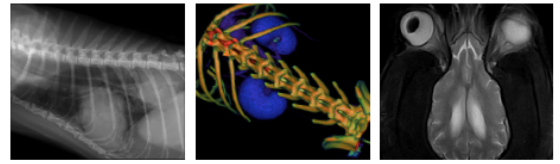
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The cardiovascular structures including the pulmonary vasculature are within normal limits.

Moderate peripheral ventral alveolar infiltrate is seen throughout the left and right lung, accentuating the cranial lung lobes, right middle lobe, and accessory lobe. The affected pulmonary areas are in a dependent position and present volume loss, which is suggestive for atelectasis.

DATE

1/6/22



PATIENT Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

Mitters Mallay

COMPUTED TOMOGRAPHIC DIAGNOSIS

- SPECIES**
- Polypoid nasopharyngeal soft tissue mass causing upper airway obstruction
 - No evidence of concurrent otitis media
 - Multifocal peripheral and ventral alveolar pulmonary infiltrates suggestive for atelectasis

Feline

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

BREED The CT study reveals a nasopharyngeal polypoid mass, which appears to connect to the right tympanic bulla. However, at this point, no evidence of concurrent otitis media is identified, which may be due to prior treatment. However, owing to the lack of concurrent otitis media, the possibility of non-polypoid and neoplastic masses such as lymphoma or other should not be rejected entirely, and excisional biopsy is recommended. The pulmonary changes are highly suggestive for positional anesthesia related atelectasis. However, bronchopneumopathy such as allergic or infectious cannot be ruled out entirely. Correlate with the clinical signs to determine the need for further definition here.

DSH

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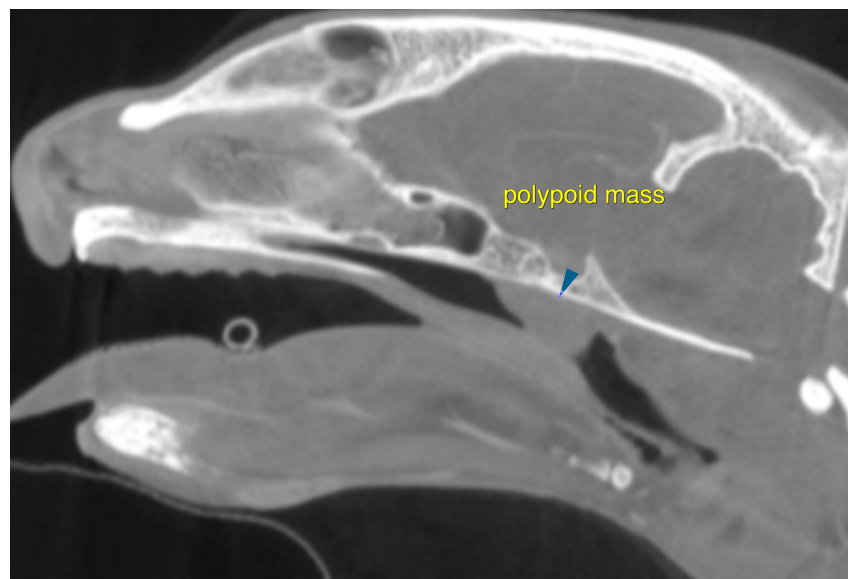
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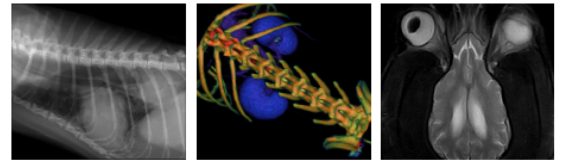
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DATE

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PATIENT

Mitters Mallay

SPECIES

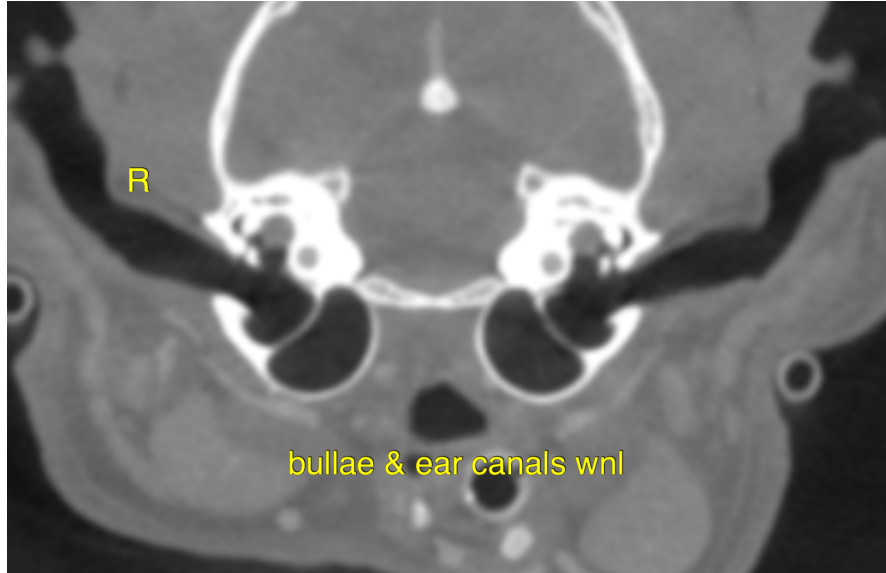
Feline

BREED

DSH

SEX

Spayed Female



AGE

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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.

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