



PATIENT PRESENTING CLINICAL SIGNS

Bones Greer Anorexia AS serous discharge and crusting debris, suspect otitis externa Swelling/growth at base of AS r/o benign growth (polyp) vs neoplasia vs secondary to dental disease vs open

SPECIES COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Feline Plain and post contrast studies available for review.

COMPUTED TOMOGRAPHIC FINDINGS

BREED

DLH

SEX

Spayed Female

A large irregular shaped and ill-defined soft tissue attenuating mass with multiple cavitation and multifocal mineralizations is seen within the left tympanic bulla and ear canal. The mass does not respect the limits of the tympanic bulla and ear canal and presents extensive aggressive osteolysis involving petrous temporal bone, tympanic bulla, and skull base as well as the left temporomandibular joint allowing for intracranial and retropharyngeal extension. There is an extra-axial mass effect onto the left temporal lobe from the ventral aspect. Severe heterogeneous contrast enhancement is seen within the mass on the post-contrast study. The left external auditory meatus is obliterated. Regional meningeal enhancement is seen.

AGE

15

The left medial retropharyngeal lymph node is moderately enlarged with mildly heterogeneous contrast enhancement.

COMPUTED TOMOGRAPHIC DIAGNOSIS

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

- Soft tissue mass with aggressive biological behavior, mineralizations, polyostotic aggressive lysis, and intracranial extension of the left middle ear.
- Left medial retropharyngeal lymphadenomegaly.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Scottsdale Veterinary
Clinic

The findings are compatible with a malignant neoplasia of the left middle ear with obliteration of the left external auditory meatus, intracranial, and retropharyngeal extension. Differential diagnosis includes lymphosarcoma, adenocarcinoma, fibrosarcoma, myxosarcoma, and other. The mass is nonresectable. Tumor growth is extensive.

REFERRING VET

Dr. Reilly

The lymph node changes may represent reactive hyperplasia as well as early metastatic disease.

Consider further definition by means of sampling of the primary tumor and regional lymph node if a final diagnosis is strived.

INVOICE

50512

DATE

2-22-22



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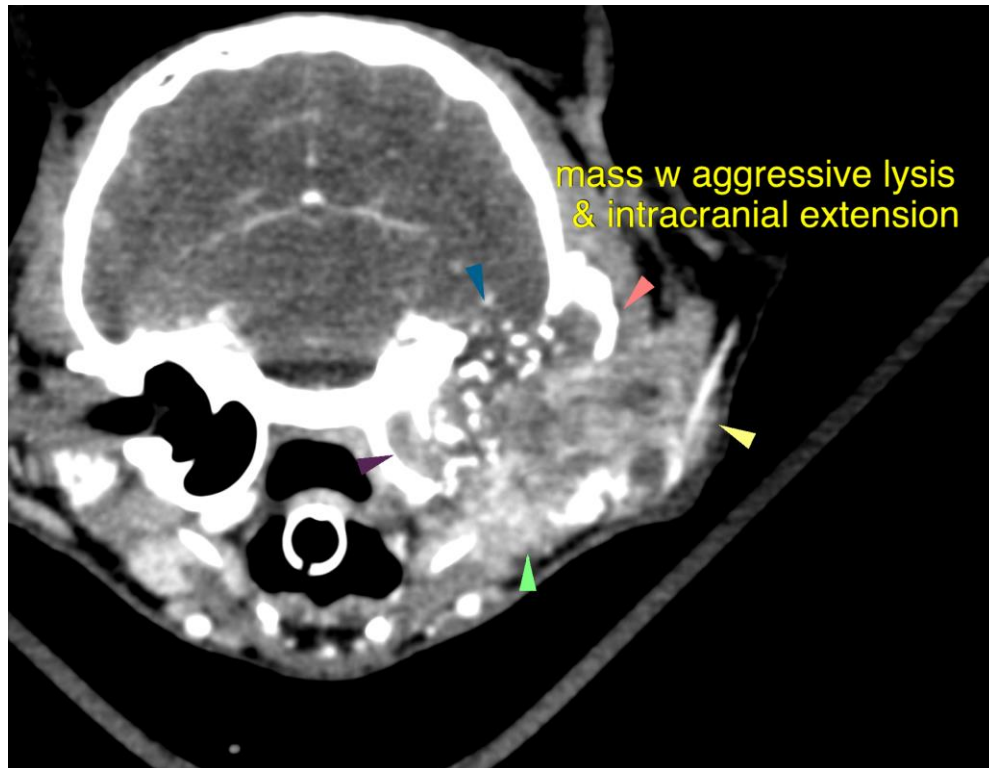
Dr. Reilly

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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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