

**PATIENT**

Persephone Kim

PRESENTING CLINICAL SIGNS

Chronic ear issues - AD: previous laser polyp sx and impacted debris, pruritic; AS: clear -> hemorrhagic, malodorous discharge, pruritic.

SPECIES

Feline

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies available for review.

BREEDDomestic Medium
Hair**COMPUTED TOMOGRAPHIC FINDINGS**

A large ill-defined and irregular shaped soft tissue mass is seen within the medial aspect of the left external auditory meatus and lateral aspect of the left tympanic bulla. The mass measures approximately 2.0 x 2.5 cm and presents severe nonuniform contrast enhancement. Aggressive osteolysis of the petrous temporal bone and tympanic bulla is seen. The mass extends from the meso- and epi- tympanum of the left tympanic bulla into the medial aspect of the left external auditory meatus which is severely expanded. The mass does not seem to respect the limits of the external auditory meatus and presents peripheral tissue infiltration. The hypotympanum of the left tympanic bulla is filled with hypoattenuating contrast negative material. Early intracranial invasion is seen between the tympanic bulla and petrous temporal bone.

SEX

FS

AGE

18 Years

Mild enlargement of the left medial retropharyngeal and parotid lymph nodes is seen.

INTERPRETED BYNele Eley, DVM
Dr. med. Vet. DipECVDI

- Soft tissue mass with aggressive biological behavior at the base of the left external auditory meatus with tympanic bulla extension and aggressive bone lysis.
- Left sided obstructive otitis media.
- Left medial retropharyngeal and parotid lymphadenomegaly.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are highly suggestive for malignant neoplasia at the base of the left external auditory meatus and within the left tympanic bulla. Petrous temporal bone lysis is seen, and the CT findings support the presence of infiltrative growth. Differential diagnosis includes carcinoma, soft tissue sarcoma, and round cell neoplasia. Final diagnosis would require sampling for histology. The mass is not resectable unfortunately.

HOSPITAL NAMEStone Cottage
Veterinary Hospital**REFERRING VET**

Spaccarelli

The lymph node changes are equivocal for reactive hyperplasia versus early metastatic disease. Consider fine needle aspiration for further definition.

INVOICE

51122

DATE

3-23-22



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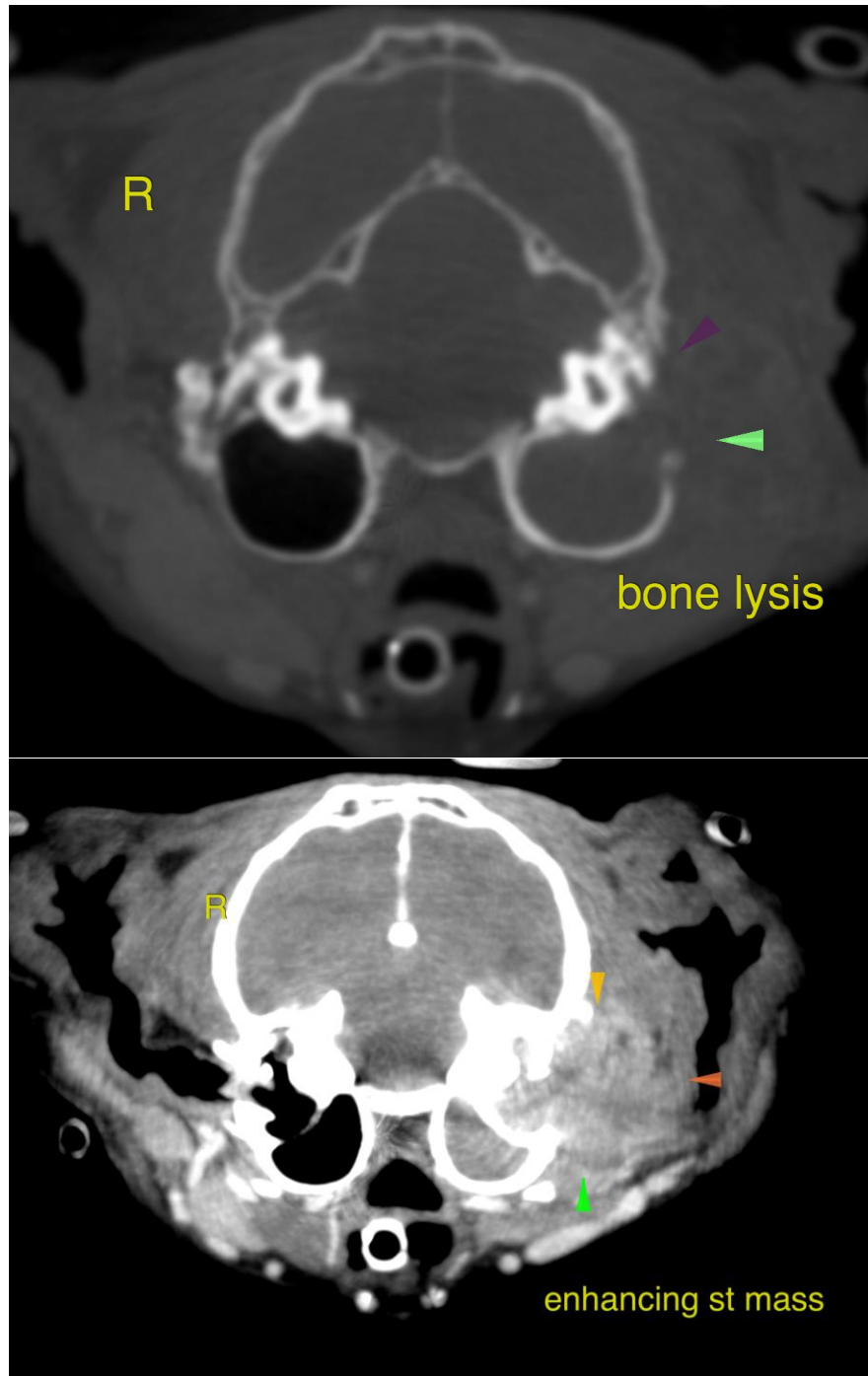
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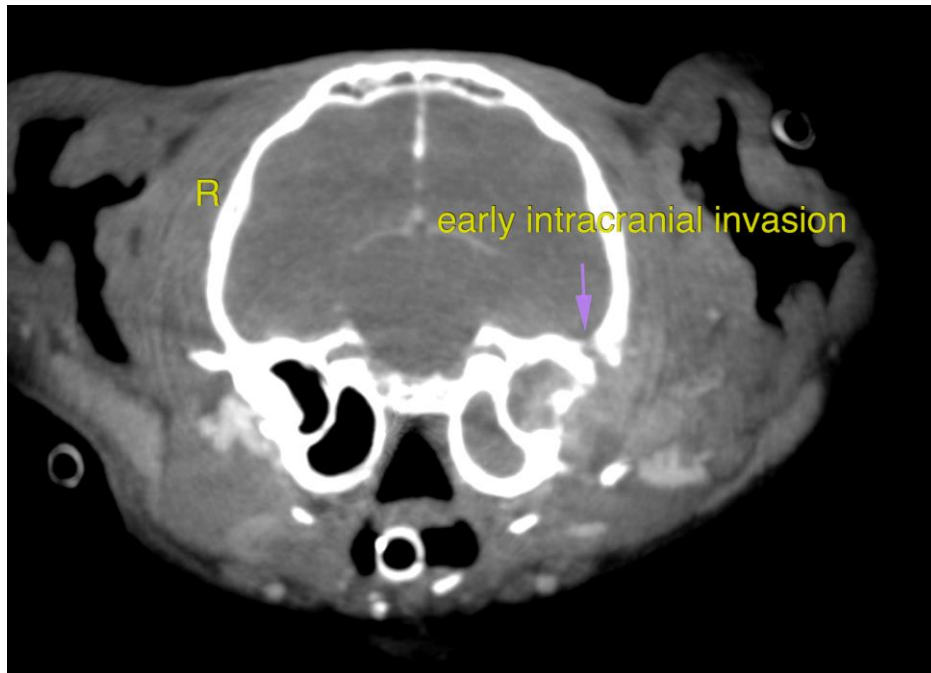
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley, DVM, Dr. med. vet., DipECVDI
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