



PATIENT

Ra Willey

PRESENTING CLINICAL SIGNS

Patient presents for possible CT/Rhino. Owner states that this has been going since 2015. Owner states that when they got him he had mucus coming from his nose, and eyes. Owner states that he has episodes of green mucus that is very thick. Owner states that antibiotics work for a little while. He has been on a 5 month course of Zeniquin. Owner states that he flushes his nose 2x daily and it seems to be better after the flushes but has to do it every day. Owner states that he gets hot spots on tail and bottom half when he stressed.

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COMPUTED TOMOGRAPHIC STUDY OF THE HEAD & THORAX

BREED

DSH

Plain and post contra studies of the head and post contrast study of the thorax available for review.

COMPUTED TOMOGRAPHIC FINDINGS

SEX

Head

MN

Moderate and symmetric turbinate destruction is seen within both nasal cavities. The mucosal lining of the remaining turbinates and nasal cavities presents moderate thickening. A moderate amount of fluid attenuating material is seen within both nasal cavities. The frontal sinuses contain a mild amount of fluid attenuating material and present swelling of their mucosal lining. Hyperostosis of the frontal sinuses and nasal bones is seen. The cribriform plate is intact. There is no evidence of a soft tissue mass.

AGE

11

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

Nasopharyngeal soft tissue swelling, and fluid accumulation is present.

Both medial retropharyngeal and submandibular lymph nodes present mild symmetric enlargement.

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The tympanic bullae are filled with fluid attenuating material. Swelling of their peripheral mucosal lining is noted as well as mild thickening of the osseous wall of the tympanic bullae. A mild amount of hypoattenuating material is present within the medial aspect of the right external auditory meatus.

Thorax

REFERRING VET

Dr. Young

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

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 are uniform and considered within normal limits.

INVOICE

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

A moderate generalized bronchial lung pattern with multifocal peribronchial cuffing and mucus plugging is seen. No evidence of interstitial pulmonary nodules or masses is identified.

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



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COMPUTED TOMOGRAPHIC DIAGNOSIS

- Bilateral chronic destructive rhinosinusitis.
- Chronic bilateral otitis media.
- Mild right sided otitis externa.
- Mild bilateral submandibular and medial retropharyngeal lymphadenomegaly.
- Bronchial lung pattern.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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The CT study reveals bilateral destructive rhinosinusitis. Differential diagnosis includes infectious rhinitis such as bacterial, viral, mixed, or lymphoplasmacytic rhinitis. Final diagnosis will require sampling which has been obtained under rhinoscopy already.

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Note the presence of bilateral chronic otitis media. At this time, there is no evidence of intracranial extension. Further otoscopic workup is recommended.

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The lymph node changes are compatible with reactive lymphadenitis.

The changes of the bronchial tree and peribronchial interstitium suggest presence of chronic lower airway disease such as allergic lower airway syndrome or infectious bronchitis. Further definition by means of lower airway sampling could be considered if not performed already.

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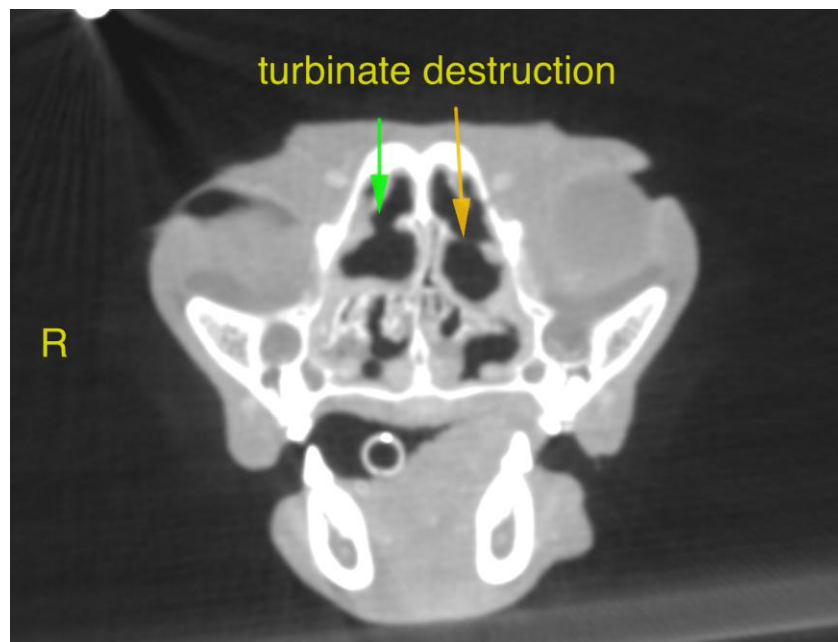
Dr. Young

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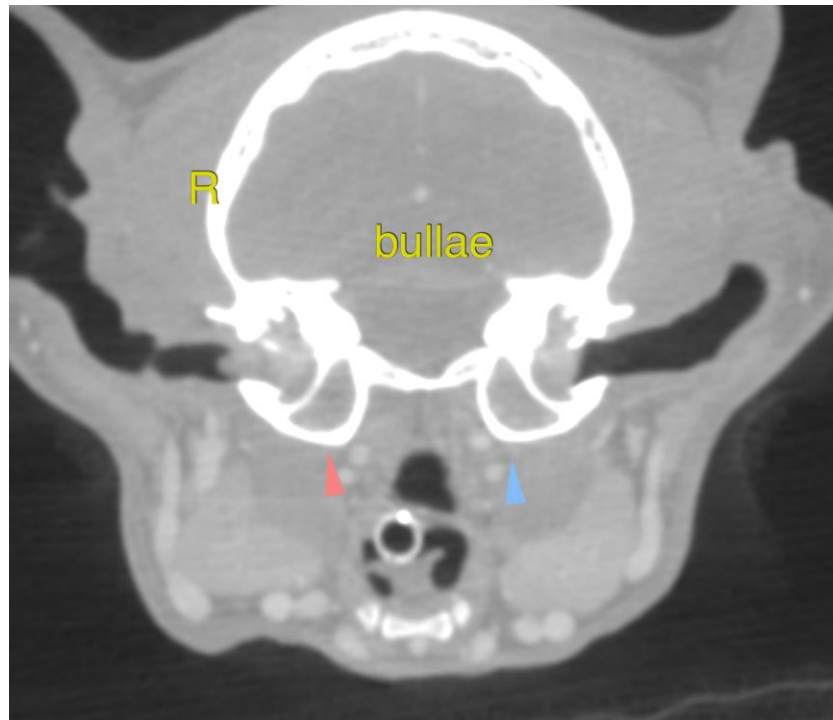
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology
Nele.Eley@sonopath.com