



PATIENT

Tippy Knight

SPECIES

Feline

BREED

Domestic Short Hair

SEX

FS

AGE

8Y

WEIGHT

2.91kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Raul Casas

HOSPITAL NAME

State Avenue Vet
Clinic

REFERRING VET

Dr Raul Casas

INVOICE

74778

DATE

4-27-26

PRESENTING CLINICAL SIGNS

Presents for CT of skull

- Referred for right-sided abscess vs growth near upper tooth/right face.
- Clinical signs present for approximately 4 weeks to 1 month.
- Difficulty eating; primarily not eating due to right-sided oral discomfort and nausea.
- Drinking water; no vomiting or diarrhea.
- Increased drooling recently.

- Black ceruminous debris noted in right ear.
- Ambulatory; mild stumbling persists.

- Walks with head tilt; falls over when shaking head.
- More severe ataxia initially before prior medication.

- Last seen by primary veterinarian before referral.
- PMHx: Hypertrophic cardiomyopathy (HCM) diagnosed in 2024.

Current medications:

- Buprenorphine (from referring veterinarian)
- Anti-nausea medication (from referring veterinarian)

Abnormal PE/Chem/CBC/UA Results: ABNORMALS: - Thin, BCS 4/9 - MM slightly dry; gums dry - Very delayed skin turgor - Slightly ataxic - Right-sided head tilt - Right mandibular lymph node enlarged - Right ear: large amount of dark debris/cerumen BP: 125/103, 212; 125/103, 201 Amylase 1172, Total Bilirubin 0.9, Calcium 11.9, Glucose 160, Total Protein 10.9, Globulin 7.3, WBC 29.34, MON 2.6, NEU 22.80, RBC 6.34, HGB 9.8, HCT 28.56, RDWc 27.3

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain study available for review.

COMPUTED TOMOGRAPHIC FINDINGS

The CT study reveals an extensive, poorly defined, aggressive, soft tissue mass involving the right side of the skull. The lesion demonstrates marked polyostotic aggressive osteolysis including the right neurocranium, right temporomandibular joint, right mandible, right tympanic bulla, and skull base with loss of normal anatomic boundaries and extension into the cranial vault indicating intracranial involvement.

The degree of soft tissue involvement cannot be fully characterized without contrast. Regional soft tissues are expanded and distorted.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Extensive aggressive mass involving the right skull with severe aggressive osteolysis involvement of the cranial vault, middle ear, temporomandibular joint, and right mandible.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The imaging features are highly concerning for aggressive malignant neoplasia such as squamous cell carcinoma, sarcoma, and less likely lymphoma. The findings are not compatible with a benign or infectious process. The lesion is highly aggressive and infiltrative. Note the presence of middle ear, inner ear, and intracranial involvement which explains the neurologic signs. Tissue sampling (biopsy) can be considered for definitive diagnosis if clinically appropriate. Prognosis is unfortunately poor to grave due to extensive local invasion and intracranial involvement as well as the high suspicion of malignant neoplasia.



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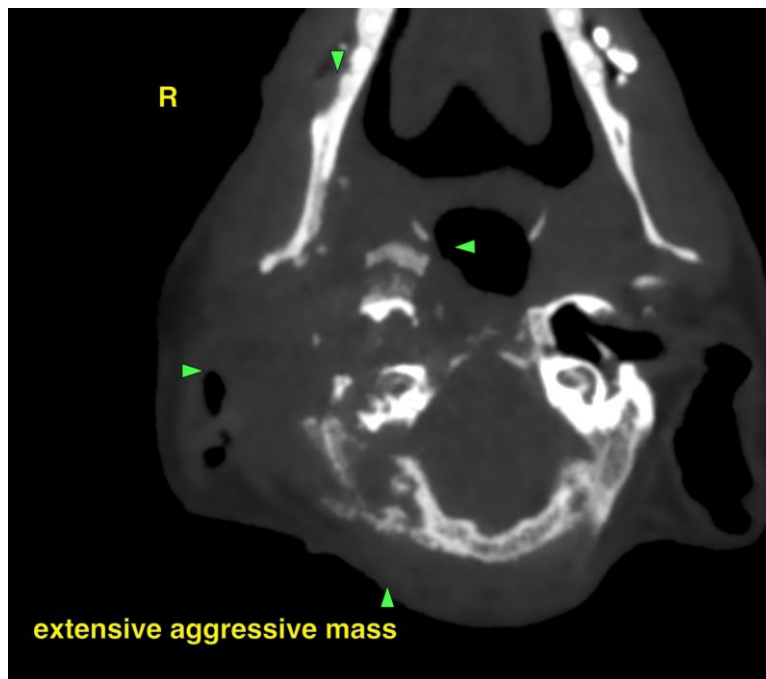
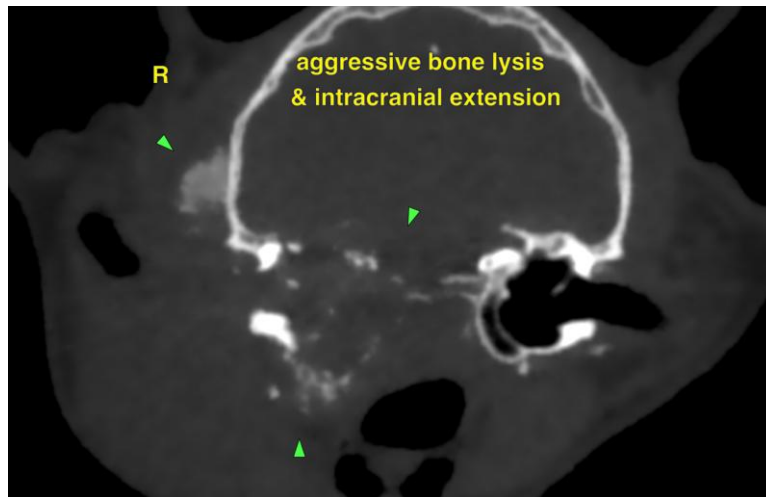
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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