



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT**  
Maggie Uribe

**SPECIES**  
Canine

**BREED**  
Chihuahua Mix

Initial problem was noted 2/2022- pet presented to rDVM for pain and swelling of the L ear canal. Pet was diagnosed with otitis externa and was treated several times over the next few months with topical and oral antibiotics and steroids. The patient partially responded, but never fully resolved. In June, the pet returned to the rDVM for recurrence of signs. A fluctuant swelling was noted on the side of the face under the L pinna. An aspirate was performed, and 3cc of yellow, cloudy liquid was drained. C/S was negative for bacterial growth. The ear canal was noted to be more stenotic and a CT was recommended in preparation for a possible TECA. Abnormal PE/Chem/CBC/UA Results: AS- stenotic with fluid in horizontal canal. Non-painful fluctuant swelling on L side of head under L ear canal, extends down to neck. Aspirated yellow fluid. In house cytology was degenerate neutrophils, macrophages and some small lymphocytes.

**COMPUTED TOMOGRAPHIC STUDY OF THE HEAD**

Plain and post contrast studies available for review.

**SEX**

FS

**COMPUTED TOMOGRAPHIC FINDINGS**

The left tympanic bulla is filled with fluid attenuating contrast negative material. The osseous wall of the tympanic bulla presents mild generalized thickening. The horizontal part of the left external auditory meatus is severely expanded and contains fluid attenuating contrast negative material. Severe stenosis of the ear canal appears to be present at the transition to its vertical portion.

**AGE**

2 Years, 8 Months

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

A large loculated cavitory lesion with fluid attenuating content and thick contrast enhancing capsule is seen directly ventral to the dilated ear canal and appears to connect with it with a thin stalk-like extension.

The left medial retropharyngeal, submandibular, and parotid lymph nodes are mildly enlarged.

**HOSPITAL NAME**

Wilson Veterinary  
Hospital

The left parotid salivary gland is mildly enlarged.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Chronic left sided otitis media and externa with ear canal stenosis/acquired atresia.
- Suspect defect and drainage tract emerging from the inflamed and expanded left ear canal.
- Regional lymphadenomegaly compatible with lymphadenitis.

**REFERRING VET**

Imlay City  
Veterinarian

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT study confirms the presence of severe chronic left sided otitis media and externa with presumably acquired stenosis or atresia of the left external auditory meatus.

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The fluid filled loculated cavitory lesion ventral to the expanded ear canal is likely to represent a drainage tract. However, abscess and sialocele of the parotid salivary gland cannot be ruled out entirely as differential diagnoses.

**DATE**

7-12-22

Total ear canal ablation, en bloc resection of the cavitory lesion, and bulla osteotomy could be discussed for this patient.



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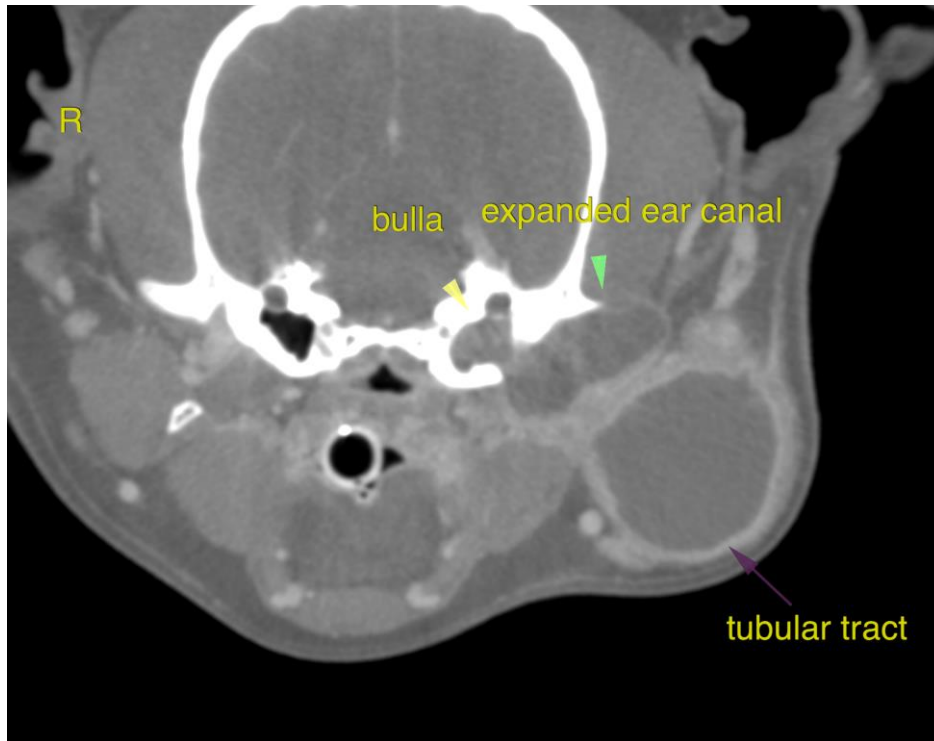
Imlay City  
Veterinarian

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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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