



PATIENT PRESENTING CLINICAL SIGNS

Annie Ferra
 Chronic upper respiratory congestion Current meds: famciclovir, lysine, prednisone, gabapentin
 Abnormal PE/Chem/CBC/UA Results: Glucose 52, Sodium 160, Amylase 2438, WBC 19.3,
 RBC 10.6, HCT 51, Platelet Count 122, Lymphocytes 15, Monocytes 5, Absolute Neutrophil
 14475, Absolute Monocyte 965

SPECIES

Feline

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

Plain and post contrast studies available for review.

BREED

DSH

COMPUTED TOMOGRAPHIC FINDINGS

The CT study reveals irregular shaped and ill-defined soft tissue within the caudoventral aspect of the bilateral nasal cavities which extends into the nasal fundus and choana. Contrast enhancement is noted and considered moderate and nonuniform. Lesion margins are ill-defined. Regional turbinate destruction is present in the caudal aspect of the left nasal cavity. Partial interruption of the nasal septum and thinning of the hard palate with a mild amount of amorphous periosteal new bone are noted. No evidence of intracranial extension is noted.

SEX

FS

AGE

10 Years

Fluid attenuating material is seen within the left frontal sinus, presphenoidal sinuses, and rostral aspect of the nasal cavities.

A moderate amount of fluid attenuating material, mucosal swelling, and swelling of the osseous lining of the left tympanic bulla are seen. Mild fluid accumulation and mucosal swelling are noted within the right tympanic bulla.

INTERPRETED BY

Nele Eley, DVM
 Dr. med. Vet. DipECVDI

The regional lymph nodes present within normal limits.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Suspect caudal nasal soft tissue mass with aggressive behavior and bilateral extension upper airway obstruction.
- Obstructive frontal and presphenoidal sinusitis.
- Chronic bilateral otitis media, moderate on the left and mild on the right hand side.

HOSPITAL NAME

Animal Hospital of
 Sussex County

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are highly suggestive for nasal neoplasia such as adenocarcinoma, other carcinoma, lymphosarcoma, and less likely soft tissue sarcoma. Destructive rhinitis cannot be ruled out entirely as a differential diagnosis but is thought by far less likely. Final diagnosis will require sampling. Rhinoscopy with sampling for histology and culture is recommended if not performed already.

REFERRING VET

Dr. Schott

INVOICE

59703

Note the presence of chronic bilateral otitis media which is unlikely to be linked to the nasal pathology. Further otoscopic workup or empirical management of the otitis could be considered if indicated based on the clinical signs.

DATE

8-15-23



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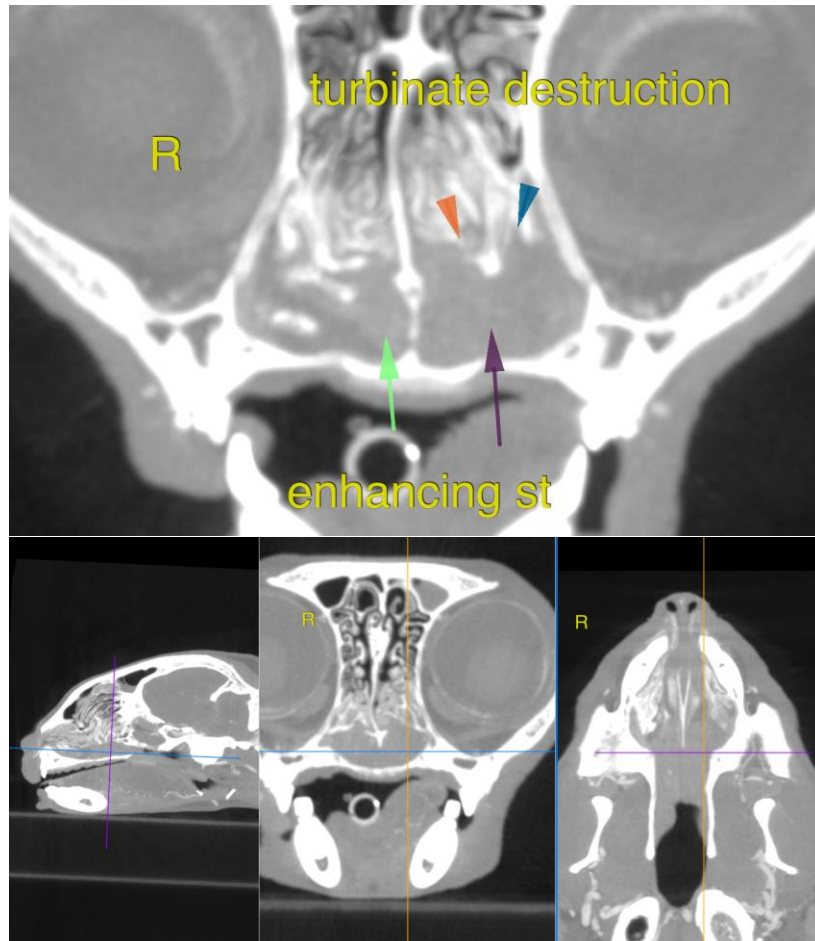
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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