



## PATIENT

Mando Stefano

## SPECIES

Canine

## BREED

English Bulldog

## SEX

M

## AGE

4Y

## WEIGHT

27.2kg

## INTERPRETED BY

Sebastian Jawinski,  
German Board  
Certified Vet Specialist  
in Diagnostic Imaging

## IMAGING PERFORMED BY

Tabitha

## HOSPITAL NAME

Pet Emergency &  
Referral Center - NVA

## REFERRING VET

Dr. Kara Fiore

## INVOICE

72810

## DATE

12-1-25

## PRESENTING CLINICAL SIGNS

Left ear - Whitish pink mass coming from dorsal horizontal canal, blocking about 60-70% of canal. Able to visualize a small portion of tympanum. Right ear - Fluid and cream colored discharge with a pink mass occupying about 90% of the horizontal canal lumen. Unable to see tympanum. The visible portions of the tympanums appeared normal.

## COMPUTED TOMOGRAPHY OF THE HEAD & THORAX

Pre/post contrast studies are provided for review.

## COMPUTED TOMOGRAPHIC FINDINGS

### Head

The head presents a brachycephalic formation with shortening of the nasal cavities and hyperostosis of the skull bone as well as severe hyperplasia of the soft palate.

The caudal part of the nasopharyngeal meatus is completely obliterated (likely due to positioning and intubation).

Both tympanic bullae show moderate hyperostosis of the bulla walls without signs of an aggressive lesion or osteolysis. Soft tissue dense filling is present and can be traced into the horizontal part of the external ear canals, indicating marked thickening of the canal wall with metaplastic calcifications on both sides. Again, signs of an aggressive lesion are not noted. The petrosal bones are inconspicuous as well as the neuroforamina. Signs of an increased meningeal enhancement are not recognized.

The soft tissues of the head and neck are unremarkable, especially the mandibular and medial retropharyngeal lymph nodes do not show particular findings.

The neurocranium is inconspicuous.

### Thorax

The cranial mediastinum shows mightily enlarged lymph nodes. These present a normal shape and contrast behavior as well as an inconspicuous periphery.

Free pleural fluid is not noted.

The pulmonary structures are unremarkable.

The thoracic borders are intact and inconspicuous, including the diaphragm.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Brachycephalic findings see above
- Signs of bilateral and chronic otitis media et externa



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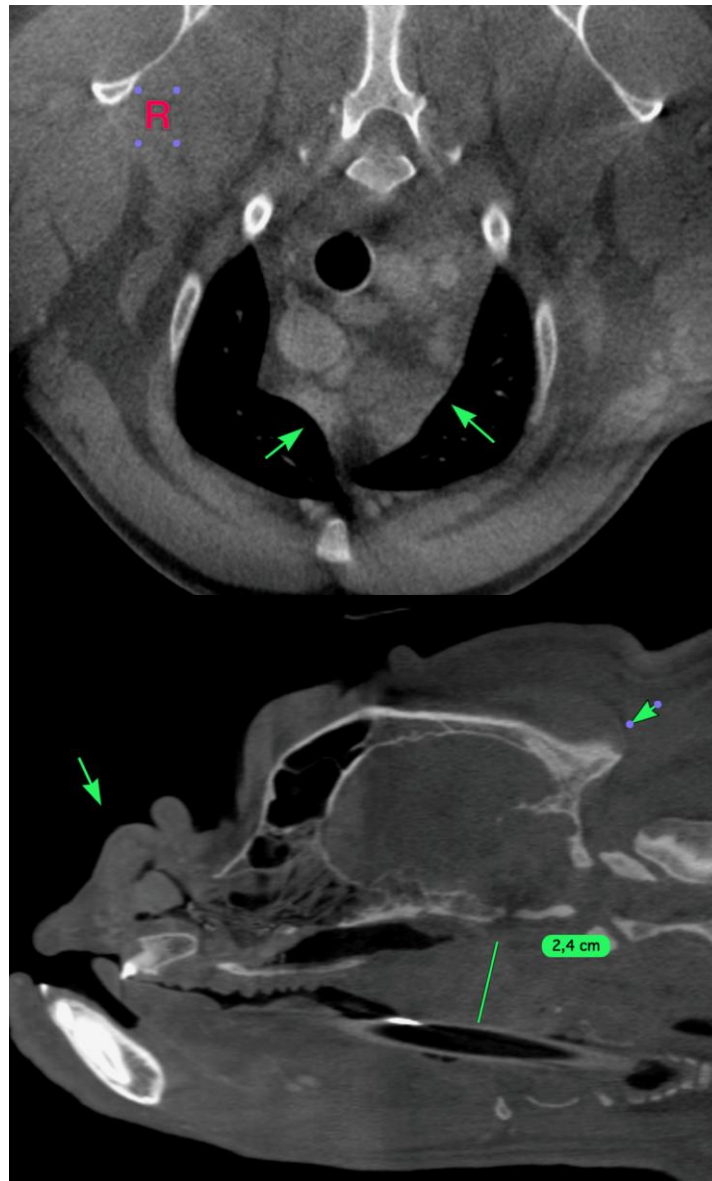
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## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes within the tympanic bullae and the horizontal parts of the external ear canals on both sides can represent a chronic inflammatory process with hyperplastic membranes and/or polyp formation. Signs of an aggressive or invasive behavior are not noted. This does not exclude initial neoplasia as seen with adenoma or adenocarcinoma of the ceruminous glands, which I consider unlikely. The bilateral finding and the absence of lytic changes would underline the assumption of a benign and chronic inflammatory lesion. Signs of regional metastases are not noted and an extension into the cranial vault is not recognized. The marked thickening of the soft palate is a predisposing factor for an insufficient mucus clearance and could show severe hyperplasia as well as an extension of polyp tissue into the pharynx. Please recheck with endoscopy.





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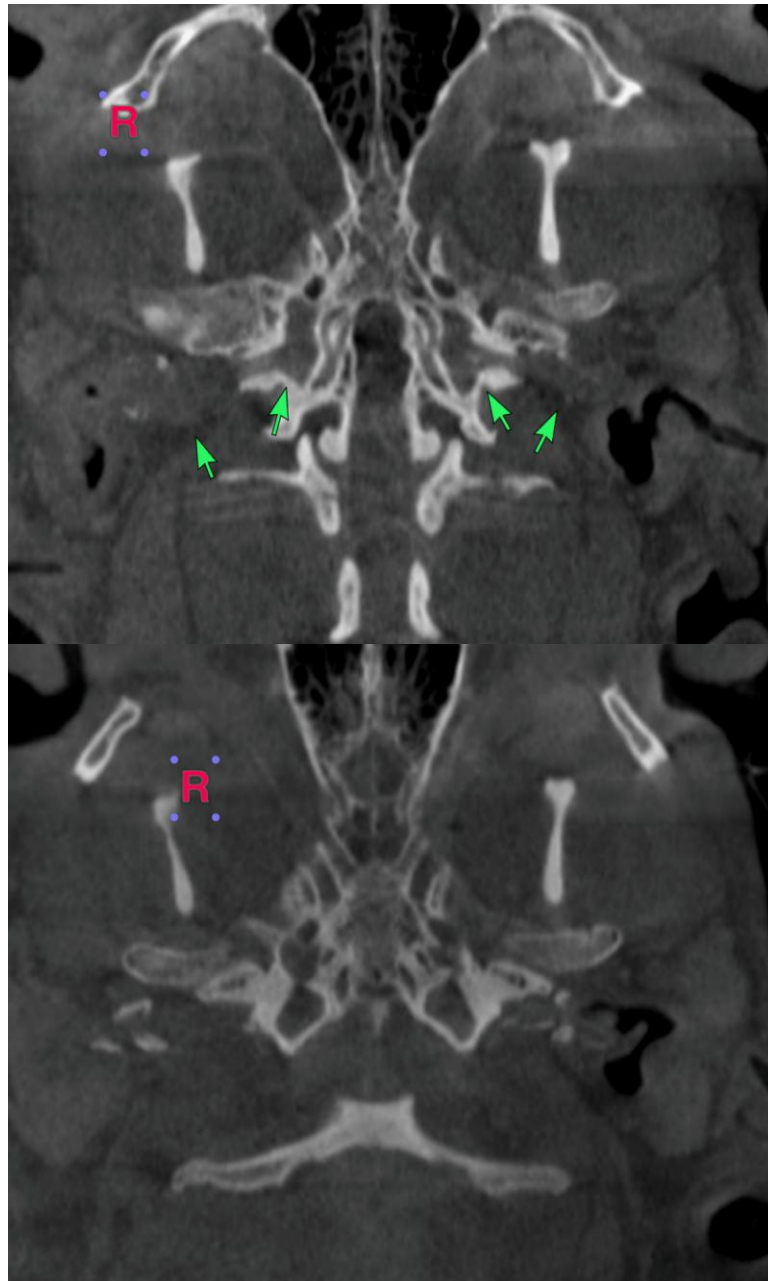
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging  
[info@sonopath.com](mailto:info@sonopath.com)