



PATIENT

Layla Miller

SPECIES

Canine

BREED

Shih Tzu mix

SEX

FS

AGE

9

WEIGHT

9.2kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Danielle

HOSPITAL NAME

Pet Emergency &
Referral Center - NVA

REFERRING VET

Dr. Kara Fiore

INVOICE

73370

DATE

1-19-26

PRESENTING CLINICAL SIGNS

History:

- Not evaluated while awake. Under anesthesia: Normal AS aside from hair in the canal and mild erythema. AD canal stenotic, canal wall diffusely irregular and nodular, and a single discrete mass not identified.
- History of chronic ear infections for seven years. Newly discovered mass in December of 2025

COMPUTED TOMOGRAPHY OF THE SKULL

A high resolution pre- and post-contrast CT study of the skull is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

Multiple teeth are absent.

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining.

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The right external ear canal presents a moderate thickened wall, increased contrast enhancing and the lumen of the right external ear canal is partially collapsed

The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.

The right medial retropharyngeal lymph node is prominent.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right sided otitis externa
- Lymphadenopathy right medial retropharyngeal lymph node
- Multiple absent teeth
- No evidence of otitis media

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes of the right external ear canal are fitting the history of otitis externa – a mass cannot be identified, but a smaller lesion can be effaced by the collapsed lumen of the respective ear canal. Surgical management via total ear canal ablation appears as a feasible treatment option.

The prominent right medial retropharyngeal lymph node is most consistent with reactive lymphoid hyperplasia.



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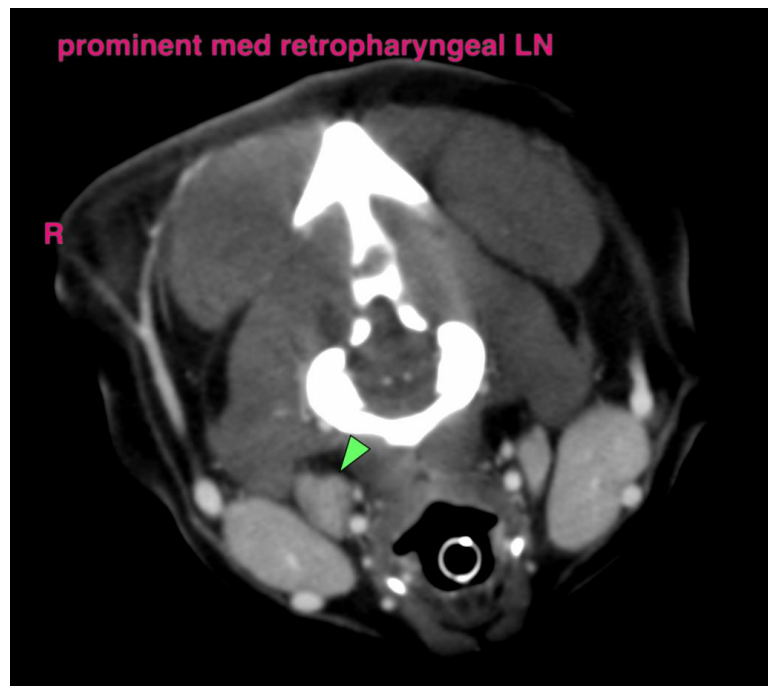
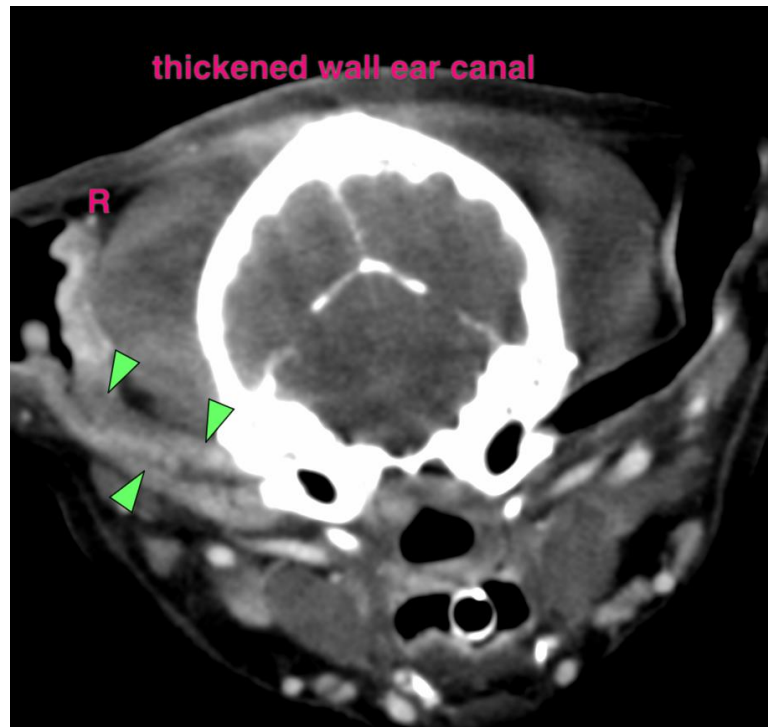
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com