



PATIENT PRESENTING CLINICAL SIGNS

Lucas Abbas History per rDVM: INCISED OVER MASS ON TOP OF HEAD BETWEEN EYES, LARGE AMOUNTS OF THICK, YELLOW, MUCOID DISCHARGE DRAINING FROM SWELLING. AFTER REMOVING SOFT TISSUE THERE IS ~3MM HOLE IN THE SKULL THAT DIVES DEEP INTO WHAT IS LIKELY THE LEFT FRONTAL SINUS. COPIOUS AMOUNTS OF MUCOID DISCHARGE REMOVED FROM HOLE. DID NOT EXPLORE FURTHER DUE TO PROXIMITY TO THE BRAIN.

SPECIES Feline See attached photos.

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

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

DSH

COMPUTED TOMOGRAPHIC FINDINGS

SEX Skull

MN The pictured parts of the dentition are complete and unremarkable in all jaw quadrants.

AGE In the dorsal aspect of the nose/frontal sinuses, extending into the in the subcutaneous tissue at the dorsal aspect of the nose, a peripheral irregular contrast enhancing, and central fluid attenuating mass is visible, perforating the nasal cavity is seen. The osseous margins of the frontal sinus present a mild dorsal bulging. The nasal bone bilaterally presents moth eaten osteolysis. The subcutaneous component of the mass is measuring 1.0 x 2.2 x 3.3 cm in size. Moderate destruction of the nasal conchal structures is seen and a mild to moderate amount of non-contrast enhancing soft tissue attenuating material is attached to the nasal mucosal lining. The frontal sinuses are filled with non-contrast enhancing material. The osseous lining of the frontal sinuses is moderately thickened. The cribriform plate is intact.

INTERPRETED BY
Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

Mobile Pet Imaging
CFL Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals are within normal limits.

REFERRING VET 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.

Borecky

INVOICE The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

49895 Thorax

DATE The bony and surrounding soft tissue structures are within normal limits.

1-27-22 A thymic remnant is seen in the cranial mediastinum.

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a

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normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

SPECIES

Feline

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The volume of the ventral aspects of the lung is reduced and the lung parenchyma is ground glass attenuating.

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Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

SEX

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- Expansile cavitory nasal mass – main component in the subcutaneous tissue dorsal aspect of the nose
- Rhinitis
- Multiple regions of dystelectasis of the lung parenchyma

AGE

3 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

For the cavitated lesion at the dorsal aspect of the nose perforating the nasal cavity inflammatory origin – like a mucoid nasal retention cyst or nasal granulomatous disease (e.g. mycotic infection) – as well as neoplastic transformation – such as squamous cell carcinoma, adenocarcinoma – are considerations. The relative smooth margins of the osseous structures and deformation of the frontal bone is increasing the odds for inflammatory origin. Further differentiation warrants biopsy of from the capsule of the mass.

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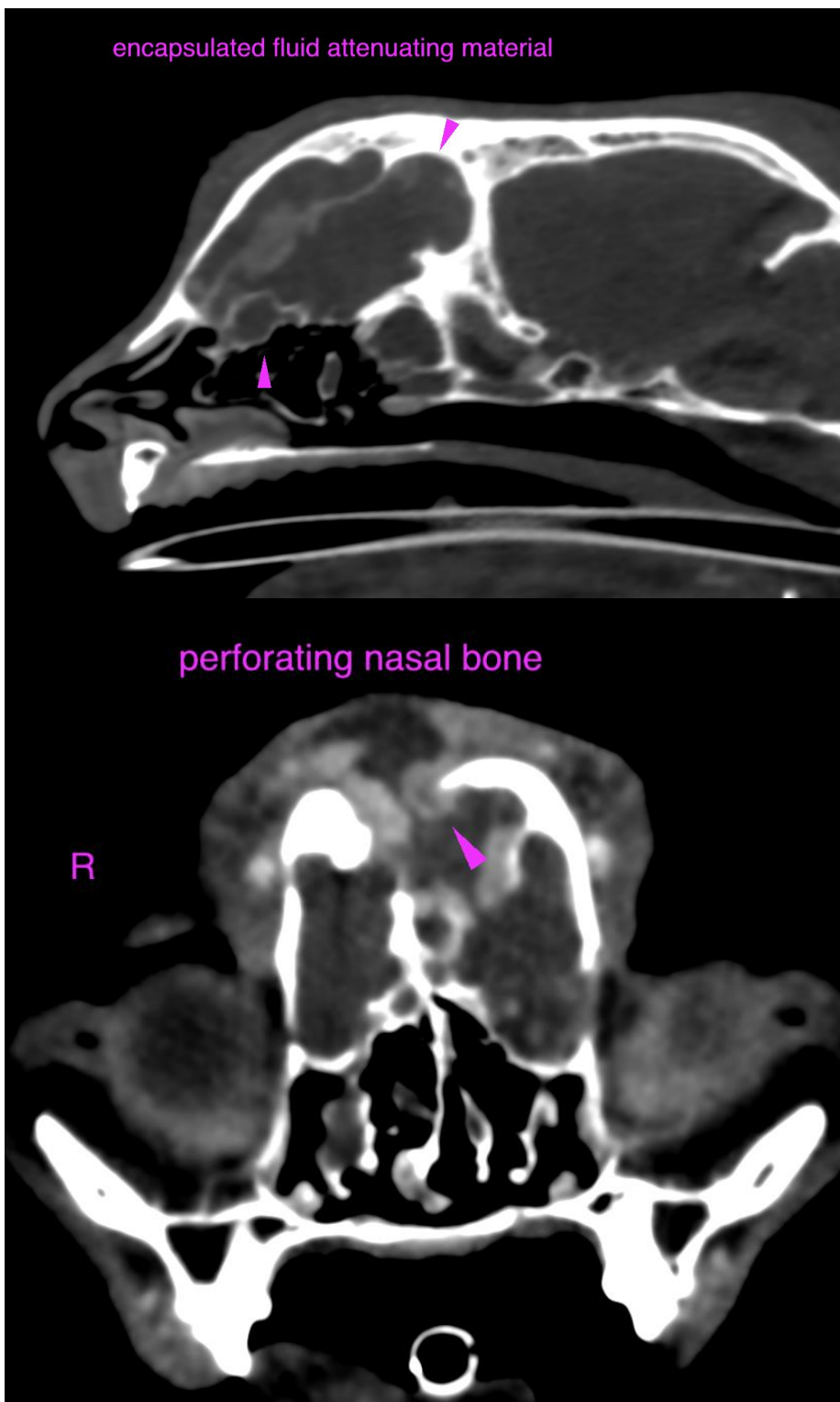
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

BREED

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