



PATIENT

Nutty Rizzo

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

14

WEIGHT

4.3

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

David

HOSPITAL NAME

Animal Surgical Center
- Oceanside

REFERRING VET

Infernuso

INVOICE

73493

DATE

1-27-26

PRESENTING CLINICAL SIGNS

History:

- history of chronic ear disease / polyp
- AD mass effect with occlusion of the ear canal

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

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

COMPUTED TOMOGRAPHIC FINDINGS

Skull

Multiple teeth are absent. Triadan 104 and 204 present advanced resorptive lesions of the roots.

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 external ear canals present a moderate thickened wall and the lumen is obliterated, R>L. The wall of the horizontal segment of the right external ear canal cannot be clearly delineated; ventral to the horizontal segment of the right external ear canal, a peripherally accentuated contrast enhancing swelling is seen. The right tympanic bulla is filled with non-contrast enhancing soft tissue material and presents a moderate thickened and mild rough wall.

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 mandibular lymph nodes and the medial retropharyngeal lymph nodes bilaterally are moderately prominent and have a uniform contrast enhancement pattern.

Thorax

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

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

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 lung parenchyma presents the expected architecture and attenuation behavior, but zones with dystelectasis.

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Bilateral thickened ear canals, R>>L



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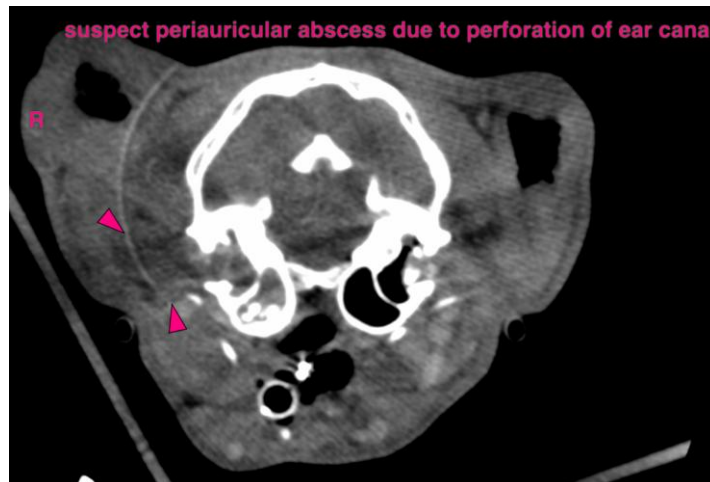
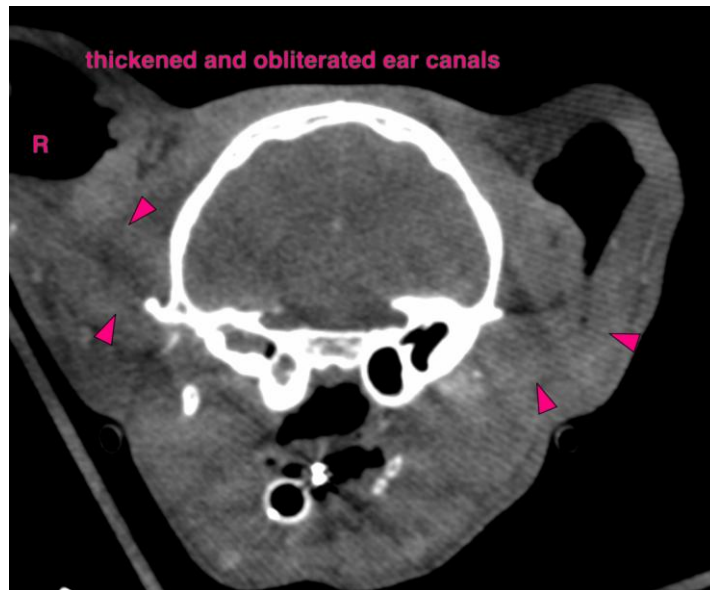
1-27-26

- Possible perforation right external ear canal with periauricular swelling/cavitation
- Right sided chronic otitis media
- Lymphadenopathy right mandibular lymph nodes and medial retropharyngeal lymph nodes bilaterally
- Tooth root resorption 104 and 204
- Zones with dystelectasis of the lung

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes of the ear canals can present both advanced chronic bilateral otitis externa – would be supported by the bilateral findings – or primary neoplastic transformation of the ear canal(s) (such as squamous cell carcinoma or ceruminous gland adenocarcinoma). Recommend biopsy of the ear canal to screen for malignancy. Due to the supposes perforation of the right external ear canal with abscess formation, total ear canal ablation would be indicated.

FNA sampling of the enlarged regional lymph nodes is beneficial to check for metastatic spread.





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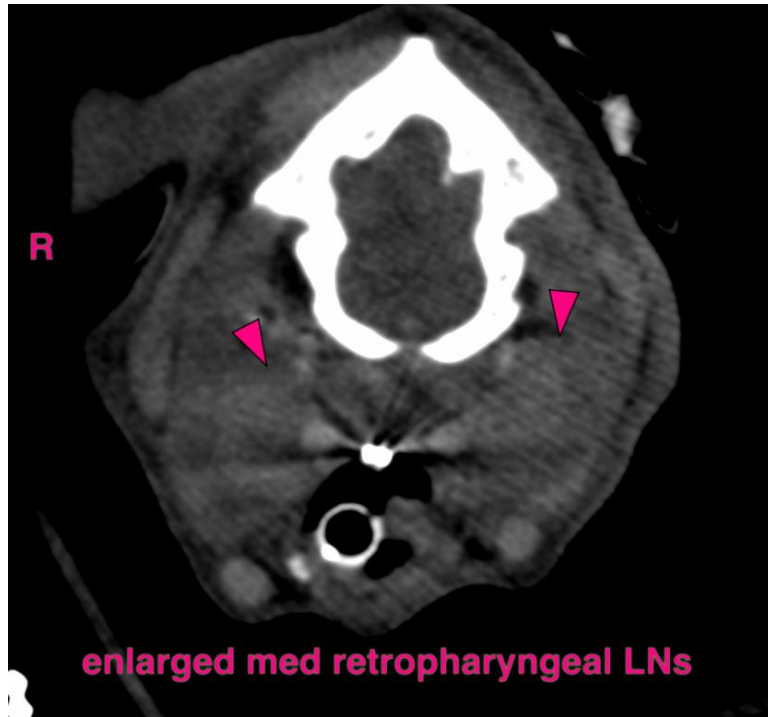
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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info@sonopath.com