



PATIENT

Scarlett Malmsten

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

7Y

WEIGHT

4kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Jenna Bringenberg

HOSPITAL NAME

Pet Emergency &
Referral Center - NVA

REFERRING VET

Dr. Michael West

INVOICE

73257

DATE

1-8-26

PRESENTING CLINICAL SIGNS

Scarlett, a 7-year-old spayed female cat, presented for a chronic non-healing head wound since late October following a suspected possum bite. Owner reports recurrent swelling with drainage, intermittent ataxia/slanting gait when pressure builds, prior hospitalization ~2 weeks ago for respiratory wheeze and severe illness, and multiple courses of antibiotics and steroids with transient improvement.

COMPUTED TOMOGRAPHY OF THE SKULL

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

COMPUTED TOMOGRAPHIC FINDINGS

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

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

Centered on the dorsal aspect of the left frontal bone, a uniform soft tissue attenuating and heterogeneous strong contrast enhancing mass is seen – dissecting through the frontal bone into the dorsal aspect of the left frontal sinus and rostradorsal aspect of the cranial fossa. The left frontal lobe is distorted, and the brain presents a midline shift to the left by the mass effect. The mass is protruding into the rostradorsal aspect of the left orbital cavity. The left frontal bone presents multifocal moth eaten osteolytic lesions.

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 external ear canals are within normal limits.

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.

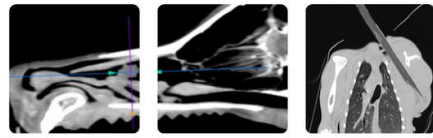
The submandibular and medial & lateral retropharyngeal lymph nodes are moderately prominent and have a heterogeneous contrast enhancement pattern.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Soft tissue mass centered on the left frontal bone with perforation of the left frontal bone and invasion of the cranial fossa, left frontal sinus and orbital cavity
- Lymphadenopathy mandibular and medial & lateral retropharyngeal lymph nodes – the odds for metastatic spread are high

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The clinically appreciated swelling is consistent with a biologically aggressive primary soft tissue neoplasia – such as adenocarcinoma (e.g. originating from the left frontal sinus), squamous cell carcinoma or fibrosarcoma. Biopsy can be performed for specification.



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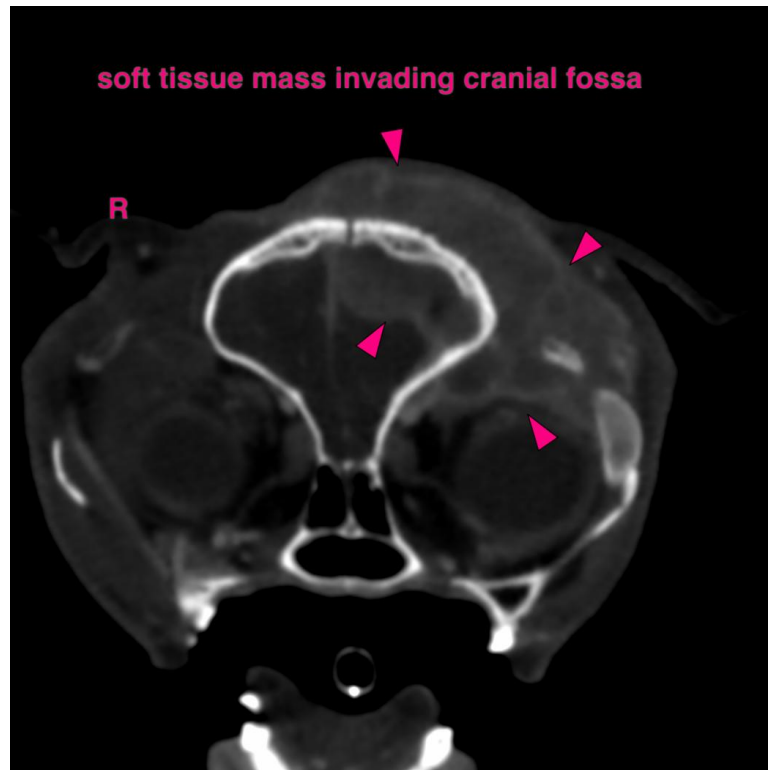
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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