



PATIENT

Slim Shady Carillo

PRESENTING CLINICAL SIGNS

Trouble breathing and head bobbing since last night,

SPECIES

Feline

r/o: r/o viral infection (herpes, etc), bacterial infection, fungal infection (suspect less likely), polyps, masses, foreign body, etc
O reports occasional head wobble - r/o middle ear infection, polyp, vs intracranial disease

Rec CT scan to look for polyps, structural changes of the nasal cavity and turbinates, fungal plaques, masses, etc.

BREED

American shorthair

COMPUTED TOMOGRAPHY OF THE SKULL

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

SEX

MN

COMPUTED TOMOGRAPHIC FINDINGS

Triadan 101, 201, 301, 302 and 401 are absent. Triadan 307 presents a moderate widening of the periodontal space.

In the left nasal cavity, moderate destruction of the nasal conchal structures is appreciated.

AGE

3

The tympanic bullae are filled with soft tissue attenuating and peripherally contrast enhancing material. The osseous lining of the tympanic bullae is mildly thickened and irregular. The osseous segment of the Eustachian tube bilaterally is moderately dilated. Level with the openings of the auditory tube into the nasopharynx, a peripheral contrast enhancing polypoid lesion is protruding into the lumen of the nasopharynx, measuring up to 8 x 7 x 14 mm in size.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

HOSPITAL NAME

Advanced Animal Imaging

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 retropharyngeal lymph nodes are prominent.

REFERRING VET

Kathleen Lottinville

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Bilateral otitis media with inflammatory nasopharyngeal polyp formation and secondary partial upper airway obstruction
- Left sided destructive rhinitis
- Periodontal disease 307
- Multiple absent incisor teeth

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

1-9-23

The findings are consistent with an inflammatory polyp originating from the tympanic bulla/Eustachian tube bilaterally, protruding into the nasopharynx, causing partial upper airway obstruction. The findings are a plausible explanation for the presenting clinical signs.

There are signs for destructive rhinitis - might have been a trigger for otitis media by ascending



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infection and the polyps are triggering rhinitis.

Removal of the polyp using traction technique is recommended if polyps reoccur, surgical management by ventral bulla osteotomy can be considered.

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Secondary reactive hyperplasia of the regional lymph nodes of the skull – FNA sampling can be performed to confirm the diagnosis and ruling out malignant transformation entirely.

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American shorthair

SEX

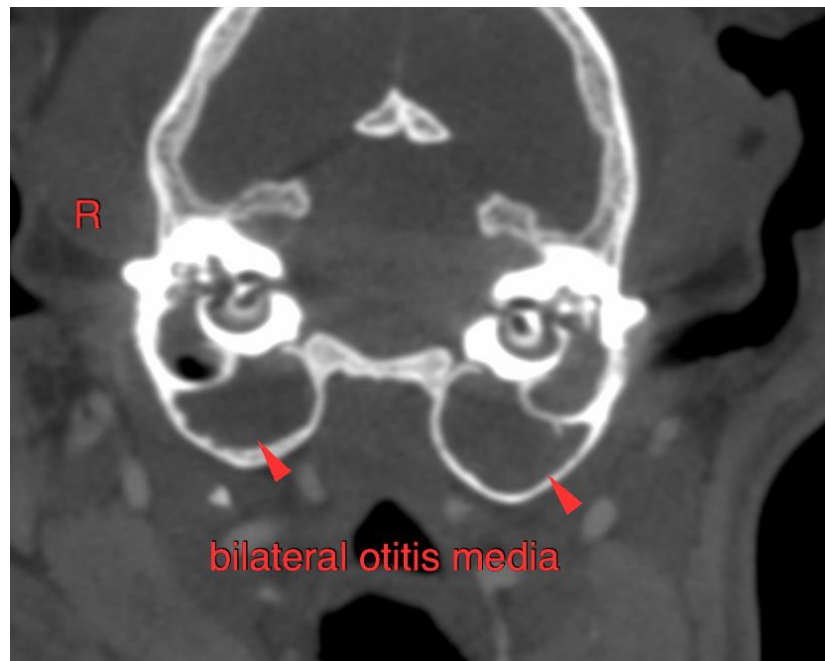
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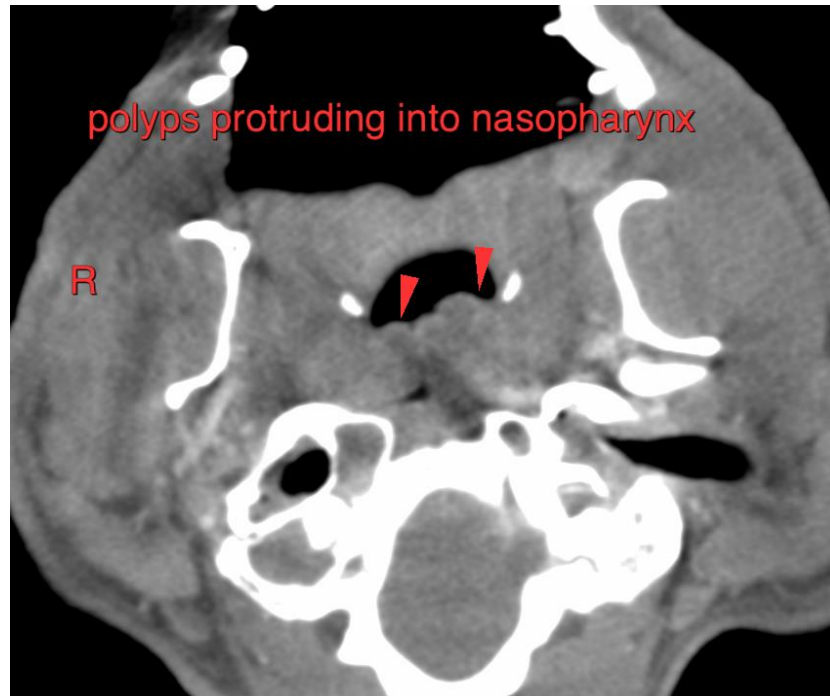
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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