



**PATIENT PRESENTING CLINICAL SIGNS**

Gabe Give Me Shelter Project

History: Gabe presented for growth in left ear. Had VBO surgery in April 2021 did well for a few months then the discharge started again. otitis externa, media left ear canal ear mass left ear  
Abnormal PE/Chem/CBC/UA Results:

**SPECIES COMPUTED TOMOGRAPHIC STUDY OF THE SKULL**

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

**BREED COMPUTED TOMOGRAPHIC FINDINGS**

DSH The tooth element 301 and 401 are absent. Triadan 303 is fractured within the proximal aspect of the alveolar crest.

**SEX**

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

Neutered Male

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

**AGE**

1 Years

The right tympanic bulla is aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The right external ear canal is within normal limits.

**INTERPRETED BY**

Sebastian Schaub, DVM Dr. med. vet. DipECVDI

The left tympanic bulla presents a moderate to marked thickened wall and a well-defined roundish defect is seen in the ventral aspect of the wall of the left tympanic bulla. The left tympanic bulla contains heterogeneous mild hyperattenuating material which is continuous with peripheral contrast enhancing material occupying the lumen of the horizontal part of the left external ear canal. The remainder of the left external ear canal are filled with fluid attenuating material.

**HOSPITAL NAME**

Animal Surgical Center

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 medial retropharyngeal lymph and mandibular lymph nodes are prominent, left > right.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**REFERRING VET**

Dr. J Short

- History of left sided ventral bulla osteotomy
- Left sided chronic otitis media
- Peripheral contrast enhancing material in left external ear canal with potential extension into left tympanic bulla
- Reactive hyperplasia of the tributary lymph nodes of the skull
- Dental fracture 303
- Absent triadan 301 and 401

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**PATIENT INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Gabe Give Me Shelter Project

The findings are compatible with left sided inflammatory polyp formation potentially extending from the left tympanic bulla into the external ear canal with secondary otitis externa. Removal of the polypoid material using traction technique should be considered. If there is regrowth of the mass, repeating ventral bulla osteotomy is a consideration but the significant thickening will likely have a negative effect on accessing the tympanic bulla. If surgery is considered extending the osteotomy rostrally to better access the lateral compartment is recommended.

**SPECIES**

Feline

**BREED**

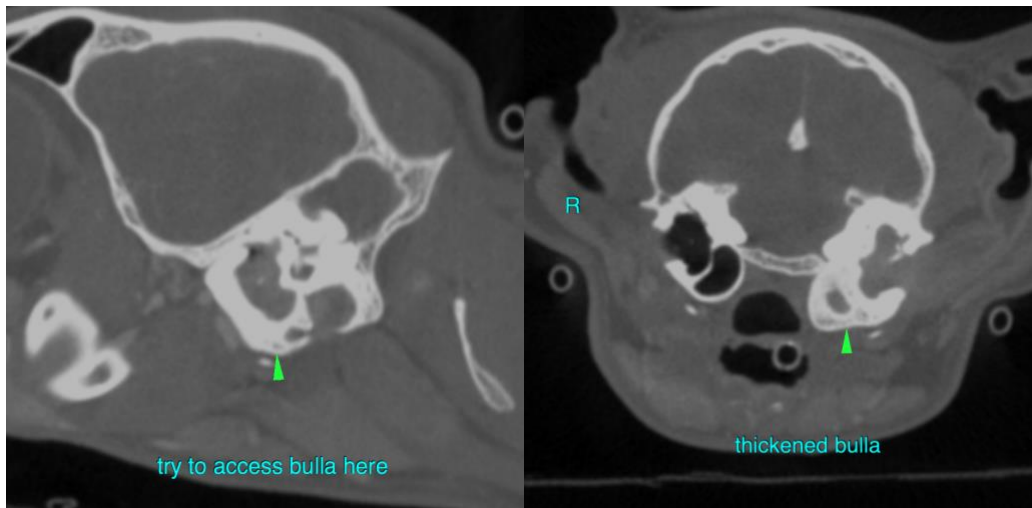
DSH

**SEX**

Neutered Male

**AGE**

1 Years



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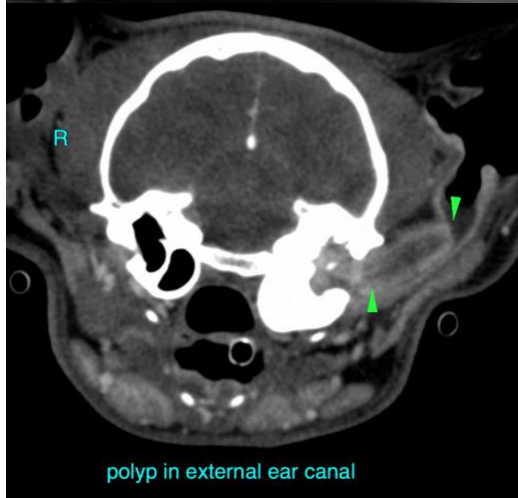
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DipECVDI

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

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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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**PATIENT**

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Feline

**BREED**

DSH

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Neutered Male

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