



## PATIENT

Flo Ward-Williams

## SPECIES

Feline

## BREED

DSH

## SEX

Spayed Female

## AGE

3 Years

## WEIGHT

2.9 kg

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

## IMAGING PERFORMED BY

Dayna Evans

## HOSPITAL NAME

Animal Trust-  
Ellesmere

## REFERRING VET

Ivo Martin

## INVOICE

35377

## DATE

10/31/25

## PRESENTING CLINICAL SIGNS

History: Or snotty discharge from nose, sneezing purulent discharge which is occ blood stained. Very congested. Well herself, EDUD normally, no v/d. Has had cat flu before when O first had her at a kitten. Constantly got discharge from nose but worse in the past few days.

Abnormal PE/Chem/CBC/UA Results: Haematocrit 0.296 L/L Platelets \* 71 x10<sup>9</sup>/L Plateletcrit \* 0.14 % platelet clumping seen Creatinine 68 µmol/L Query positive result FIV/FELV test as slight colour development for both

## COMPUTED TOMOGRAPHIC STUDY OF THE SKULL

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

## COMPUTED TOMOGRAPHIC FINDINGS

Triadan 101 and 201 are absent. Triadan 308 and 409 present a widened periodontal space.

In both nasal cavities, advanced destruction of the nasal conchal structures is appreciated, resulting in an empty nose. Fluid attenuating material is attached to a generalized thickened nasal mucosal lining. The left frontal sinus presents irregular advanced hyperostosis of the osseous lining. The right frontal sinus is partially obliterated by gravity dependent soft tissue material.

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

The right tympanic bulla is partially obliterated by fluid attenuating material. The osseous lining of the right tympanic bulla is mildly thickened and rough. 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 retropharyngeal lymph nodes are prominent and present a mild irregular contrast enhancement pattern.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Destructive rhinitis
- Bilateral sinusitis frontal sinus with hyperostosis left frontal sinus
- Lymphadenopathy mandibular lymph nodes bilaterally and medial retropharyngeal lymph node bilaterally – consistent with reactive lymphoid hyperplasia
- Right sided chronic otitis media without inflammatory polyp formation
- Periodontal disease 308 and 409
- Absent triadan 101 and 201

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The destructive rhinitis is commonly primary viral ± bacterial or mycotic superinfection. The right otitis media is considered as a sequela to the rhinitis due to ascending infection. Recommend rhinoscopy including biopsy and sampling for microbial culture - in many cases the initial causative infectious



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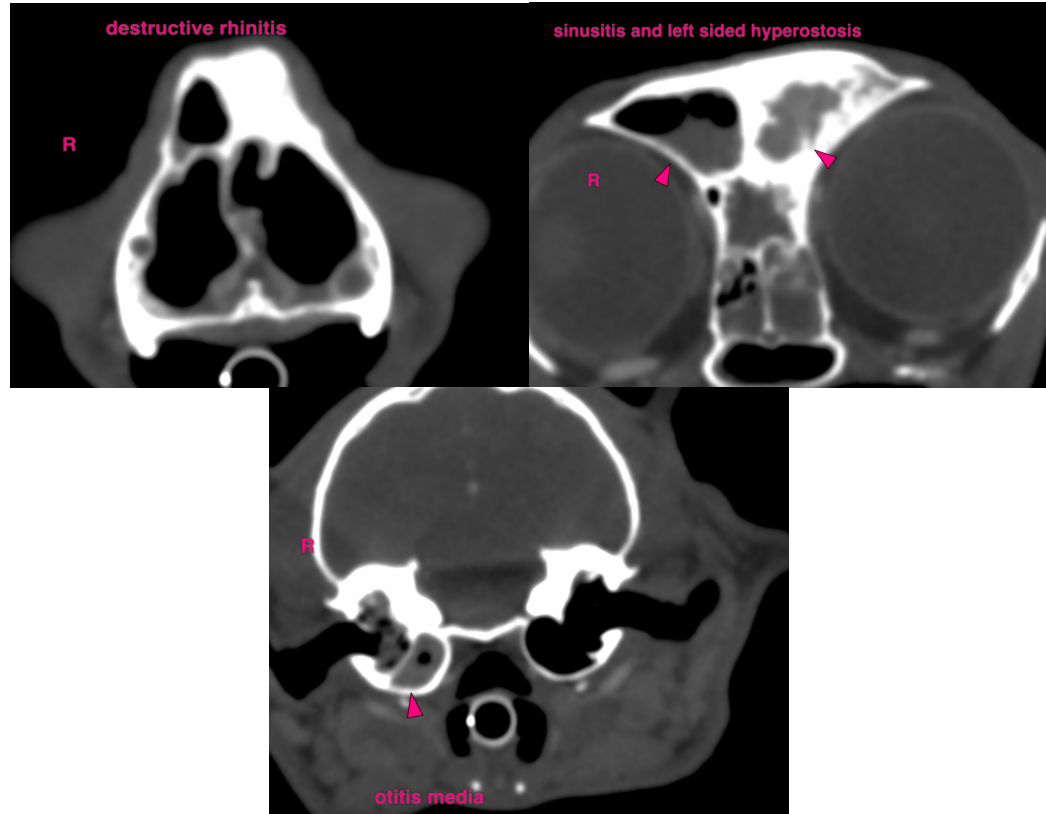
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agent cannot be isolated anymore. In chronic cases of rhinosinusitis, clinical signs are prone to reoccur.



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.

**Sebastian Schaub**, DVM, Dr. med. vet. DipECVDI  
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