



PATIENT

Lulu Zemski

SPECIES

Feline

BREED

Maine Coon Mix

SEX

Spayed Female

AGE

13 Years 3 Months 11
Days

WEIGHT

9.78 Pounds

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Joseph D'Abbraccio,
DVM

HOSPITAL NAME

Catskill V, PLLC

REFERRING VET

Joseph D'Abbraccio,
DVM

INVOICE

35444

DATE

11/5/25

PRESENTING CLINICAL SIGNS

History: Reason for Visit: Left eye swelling and suspected mass evaluation. Head and chest CT to investigate possible abscess, mass, or infection Patient presented today for redness and swelling to the left eye for 3 weeks. Examination revealed left eye firm globe with increased resistance to retropulsion, swelling periocularly, disfigured appearance, with nasal discharge present. Owner noted episodes of Lulu swallowing hard, as if experiencing throat discomfort, and possible congestion. Progression of Symptoms: Owner reports symptoms appeared suddenly and have persisted without improvement since onset. C/S/V/D : Owner reported Lulu has episodes of hard swallowing and possible congestion; no C/S/V/D Meds: Eye Ointment - given two days ago.

Abnormal PE/Chem/CBC/UA Results: PE: Appearance: Facial disfigurement present, periorbital swelling on left side, nasal discharge on left side; Fear/Anxiety/Stress Score: 3/5 - Nervous, difficult to medicate.; Eyes: OD: Soft globe, third eyelid elevates appropriately, clear, no discharge. OS: Firm globe with increased resistance to retropulsion, swelling periocularly, disfigured appearance, nasal discharge present.; Nose/Throat: Discharge from left nostril Swelling around left eye and left side of face Concern for drainage problems on left side; Cardiovascular: Grade II/VI heart murmur, left side, loudest.; Respiratory: Discharge present from the left nostril.; CBC: Neutrophils 10.89; Chem: Sodium 167; Left Nasal Tissue Biopsy pending

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL & THORAX

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

COMPUTED TOMOGRAPHIC FINDINGS

SKULL

Multiple teeth are absent.

The left nasal cavity is obliterated by expansile, uniform soft tissue attenuating and mild irregular contrast enhancing material. Destruction of the associated nasal conchal structures is seen. The left nasal soft tissue material is dissecting through the lateral osseous lining of the left nasal cavity and is extending into the medial aspect of the left orbital cavity and the subcutaneous tissue along the lateral aspect of the nose. The left ocular bulb is deviated rostrolaterally. In the rostral cranial fossa, a midline shift of the falx to the right is appreciated. The left frontal sinus is filled with fluid attenuating material.

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

In the right tympanic bulla, a small amount of fluid attenuating material is visible. The external ear canals are within normal limits.

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

THORAX

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



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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.

Multiple small zones with peribronchial consolidation of the lung parenchyma are appreciated.

Small incidental gas pockets are seen within the esophageal lumen; there is no evidence of abnormal dilation.

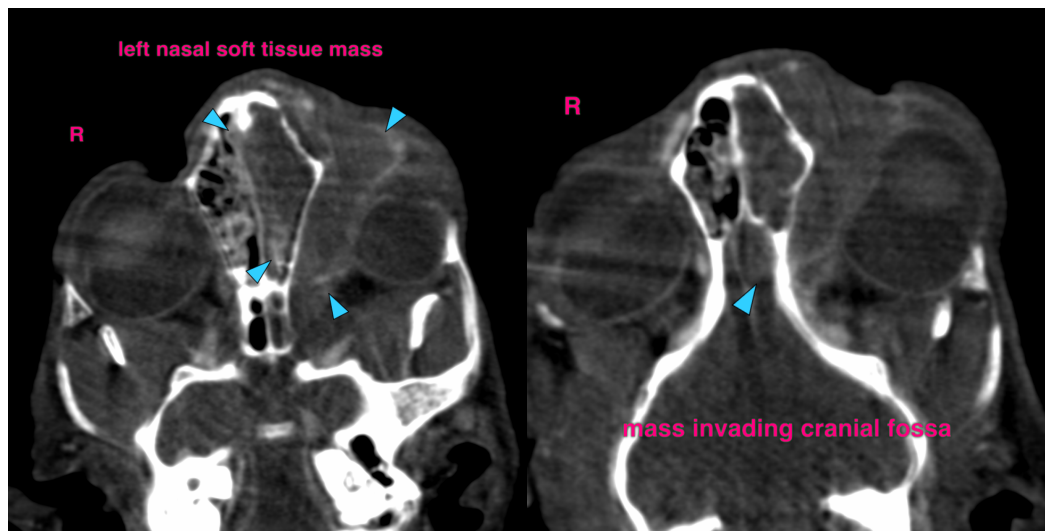
COMPUTED TOMOGRAPHIC DIAGNOSIS

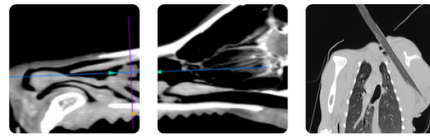
- Biologically aggressive primary left nasal soft tissue neoplasia with invasion of the cranial fossa and left orbital cavity
- Secondary left sided exophthalmos
- Secondary left sided obstructive sinusitis
- Multifocal peribronchial pulmonary consolidation – partially with a nodular pattern
- Right sided mild otitis media
- Multiple absent teeth

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The left nasal soft tissue mass is consistent with primary nasal soft tissue neoplasia. Differentials include lymphosarcoma, adenocarcinoma, squamous cell carcinoma, other. FNA sampling/biopsy of the subcutaneous swelling along the left aspect of the nose or rhinoscopy including biopsy can be performed for specification. The Adam tumor stage is 4.

The small zones with peribronchial consolidation can present zones with pneumonia versus granuloma versus pulmonary metastatic disease.





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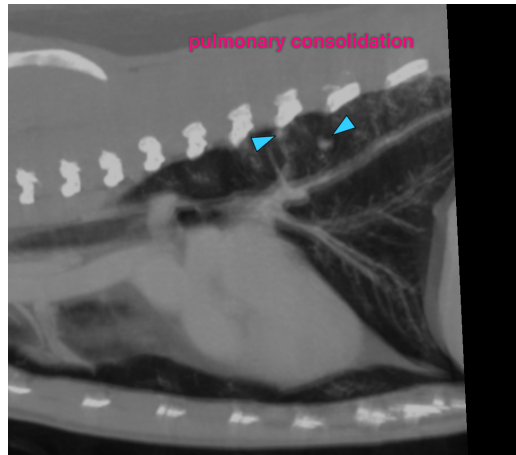
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
info@sonopath.com