



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Peluche Guach  
**SPECIES** Feline  
**BREED** DSH  
**SEX** Male  
**AGE** 1 Year 1 Month

History: (11-26-2022) Patient was presented for evaluation of respiratory problems. Nebulization solution ran ot. Patient had 2 episodes of diarrhea; owner removed wet diet and diarrhea resolved. He is eating well and he is BAR. Has nasal discharge and is breathing abnormally. Does not have vomiting. PE: Eyes small white pinpoint corneal opacity OD; corneal opacity OS with vascularization Ears debris AU Respiratory congested; yellow mucoid nasal discharge Normal Systems: General Appear, Oral-Teeth, Coat-Skin, Cardiovascular, Gastro-Abdomen, Urogenital ,Neurological, Musculoskeletal, Lymphatics tapering dose of prednisolone, doxycycline and nebulization if there is no improvement, recommend respiratory PCR. (12/9/2022) Patient was presented for recheck. Owner has been giving nebulization therapy, doxycycline and prednisone. owner has not seen improvement regarding respiratory symptoms. he has good appetite and energy. PE: Eyes absent menace response OU; corneal opacity with vascularization OS; small white corneal opacity OD Ears mild to moderate amount of debris AU Respiratory sneezing, congested, mucoid nasal discharge Normal Systems: General Appear, Oral-Teeth, Coat-Skin, Cardiovascular, Gastro-Abdomen, Urogenital ,Neurological, Musculoskeletal, Lymphatics recommended culture of nasal discharge - owner declined referred for rhinoscopy or CT Scan of head

Abnormal PE/Chem/CBC/UA Results: CBC --- lymphocytosis 7.73 CHEM --- hyperglobulinemia 5.5 FeLV/FIV - positive to FIV Radiographs – WNL

**COMPUTED TOMOGRAPHIC STUDY OF THE SKULL**

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

**INTERPRETED BY COMPUTED TOMOGRAPHIC FINDINGS**

Sebastian Schaub, DVM Dr. med. vet. DipECVDI  
 Triadan 206, 301, 401-403 are absent. The tip of the crown of triadan 204 is absent, exposing the pulp cavity to the dental surface.

**HOSPITAL NAME** The volume of the left masticatory muscles is generalized moderately decreased and the respective musculature presents increased contrast enhancing.

Veterinary Image Center  
 The osseous lining of the nasal cavity presents with multiple chronic fractures lines and secondary malformation of the splanchnocranium. A cleft is seen in the caudal aspect of the hard palate, extending into the base of the soft palate. A moderate amount of fluid attenuating material is attached to the nasal mucosal lining bilaterally. In the left nasal cavity, advanced destruction of the nasal conchal & turbinate structures is appreciated. In the dorsal aspect of the left nasal cavity a hyperattenuating

**REFERRING VET** Dr. M. Martes, DVM

**INVOICE** 20177  
 There is a chronic fracture of the calvarium level with the zygomatic process of the left temporomandibular joint, with mild dorsal and lateral deviation. The subchondral bone of the left condylar process of the mandible is irregular.

**DATE**

12/16/22



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 The left tympanic bulla is filled with soft tissue attenuating material, the osseous lining is mildly thickened and smooth. The horizontal segment of the right external ear canal cannot be followed up to the external porus acusticus and there is a short central fluid attenuating tubular structure between the right external ear canal and the right tympanic bulla.

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 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.

**BREED**

DSH

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**SEX**

Male

**AGE**

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- History of craniofacial trauma with comminuted fracture of the viscerocranium and fracture of the calvarium level with the zygomatic process of the left temporal bone
- Cleft palate in the caudal aspect
- Destructive rhinitis with small osseous fragment in left nasal cavity
- Mild stenosis of the choanal due to malalignment
- Left sided otitis media
- Possible traumatic rupture of the right external ear canal versus otitis externa versus segmental atresia
- Lymphadenopathy mandibular and medial retropharyngeal lymph nodes bilaterally – suspect reactive hyperplasia
- Suspect neurogenic muscle atrophy left masticatory muscles due to preceding trauma
- Complicated dental fracture 204

**INTERPRETED BY**

Sebastian Schaub,  
 DVM Dr. med. vet.  
 DipECVDI

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The main finding is the cleft palate – likely traumatic in origin due to preceding craniofacial trauma – as potential trigger for the rhinitis. The stenosis of the choana in combination with the rhinitis are a plausible source for the abnormal breathing. Surgical management of the palatine cleft is recommended.

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The clinical relevance of the osseous fragment displaced into the left nasal cavity is unclear and likely presents a small osseous fragment due to preceding nasal fracture. Recommend otoscopic evaluation of the right external ear canal.

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**PATIENT**

Peluche Guach

**SPECIES**

Feline

**BREED**

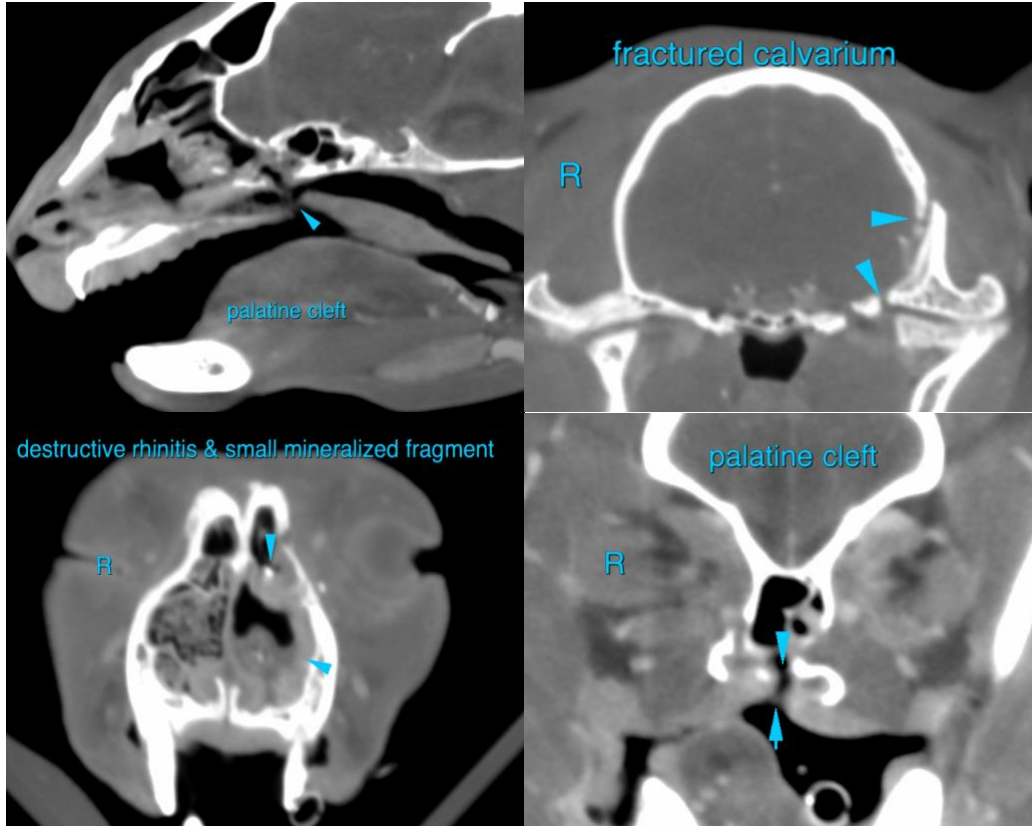
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DVM Dr. med. vet.  
DipECVDI

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.

**HOSPITAL NAME**

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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.

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
sebast.schaub@gmail.com

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