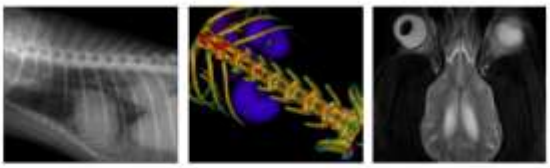
SonoPath Teleradiology

EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Lilo Stephens

SPECIES

Feline

BREED

Havana Brown

SEX

FS

AGE

13

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Petroglyph Animal Hospital

REFERRING VET

Amanda Espinosa

INVOICE

48767

DATE

12-2-21

PRESENTING CLINICAL SIGNS

Pt has a long history of mild nystagmus since young kitten. Pt just recently had a few episodes of ataxia, vomiting, and more significant nystagmus (presumed to be vestibular disease). Pt's littermate died a year ago after having developed similar clinical signs. CT of littermate identified some sort of intracranial tumor and necropsy of littermate had identified ceruminous gland carcinoma. Family is concerned this pt. may have similar condition.
Abnormal PE/Chem/CBC/UA Results: Mild nystagmus, moderate dental disease (pt was anesthetized today for CT scan and dental procedure with 4 extractions).

COMPUTED TOMOGRAPHY OF THE SKULL

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

COMPUTED TOMOGRAPHIC FINDINGS

Multiple teeth are absent. The remaining teeth present evidence of advanced periodontal disease, most accentuated 108&204.

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

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.

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.

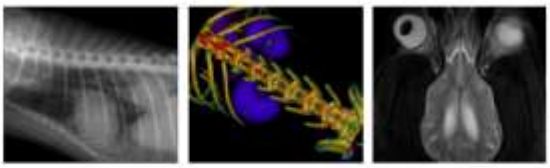
Level with the course of the sublingual monostomatic salivary gland, a small (≤3 mm) central fluid attenuating lesion with a contrast enhancing capsule is visible.

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.

Mild nodular enlargement of the thyroid glands bilaterally is present.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Small cavitary lesion region of left sublingual monostomatic salivary gland
- Multiple absent teeth
- No evidence of otitis media/externa or mass
- Structural normal brain



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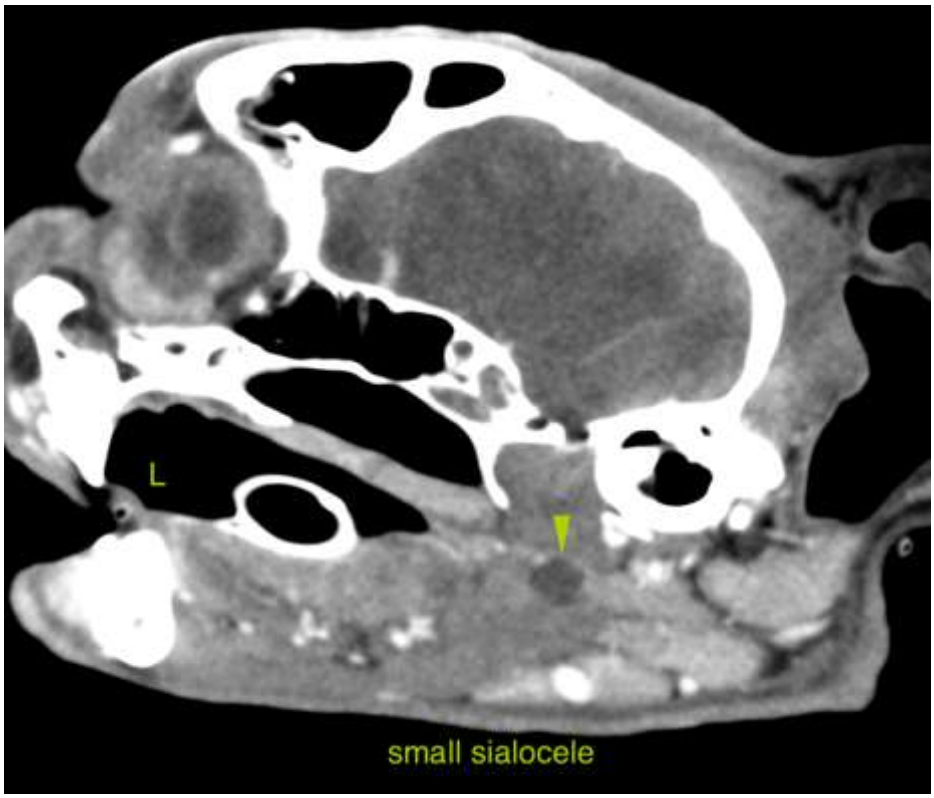
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The small cavitary lesion is suggestive for a small cyst/sialocele of the left sublingual monostomatic gland; a small abscess is a potential but considered less likely. Monitor the region for any development of swelling warranting reevaluation of the skull.

The nodular enlargement of the thyroid gland is likely a sequela to (non)functional nodular hyperplasia versus thyroid adenoma. Recommend complementing workup by complete blood work including T4 value.

No additional clinically relevant abnormalities are appreciated, there are no signs for mass lesions along all parts of the ears or intracranial lesions. Suspect congenital nystagmus.



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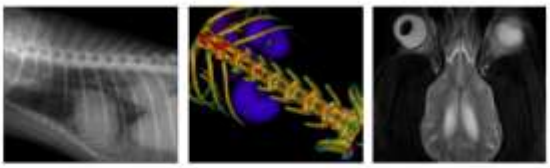

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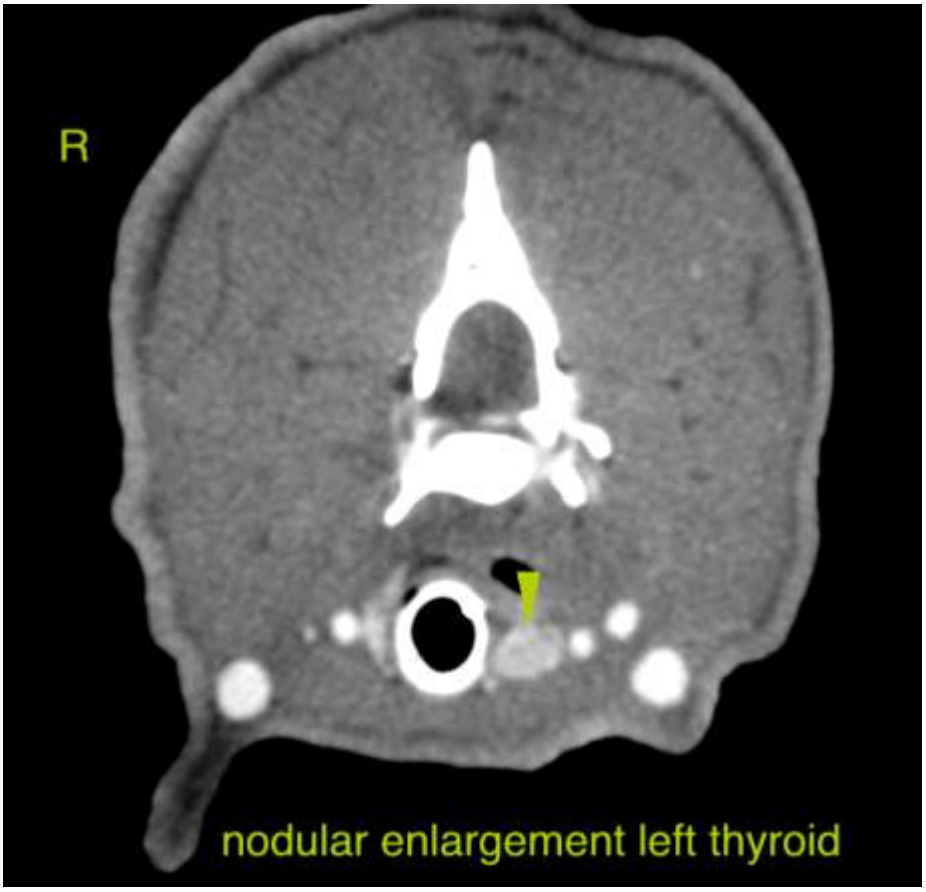

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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