



PATIENT

Kitty Rodda

SPECIES

Feline

BREED

DSH

SEX

FS

AGE

10

WEIGHT

5kg

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

EH

HOSPITAL NAME

Crown Veterinary
Specialists and
Associates

REFERRING VET

Carly Bloom

INVOICE

73108

DATE

12-23-25

PRESENTING CLINICAL SIGNS

Chronic congestion (months) and stridor/ stertor. Right sided nasal congestion with a fleshy protrusion noticed from right nare (suspect turbinate). r/o right sided rhinitis with fluid in middle ear, and right frontal sinus Chronic cough (years) bronchial pattern noted on radiographs from March 2025. r/o feline asthma

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

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

COMPUTED TOMOGRAPHIC FINDINGS

Skull

Multiple teeth are absent.

The right nasal cavity is obliterated by uniform soft tissue attenuating and homogeneous moderate contrast enhancing material. The right frontal sinus is filled with non-contrast enhancing soft tissue material.

The nasopharyngeal tonsils are prominent and protruding ventrally into the lumen of the nasopharynx.

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

Both tympanic bullae are filled with soft tissue attenuating material. 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 moderately prominent and rounded.

In the subcutaneous tissue along the caudodorsal aspects of the skull, a focal soft tissue swelling with interspersed gas inclusion is visible – most consistent with preceding subcutaneous injection.

Thorax

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

The cranial mediastinal lymph nodes and the right tracheobronchial lymph node are prominent.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

Multiple peripheral bronchial segments are obliterated by soft tissue material and present segmental saccular dilation – resulting in a 'tree-in-bud' pattern.

The right middle lung lobe is consolidated with air-bronchograms and presents a moderate decreased volume.

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right nasal soft tissue mass



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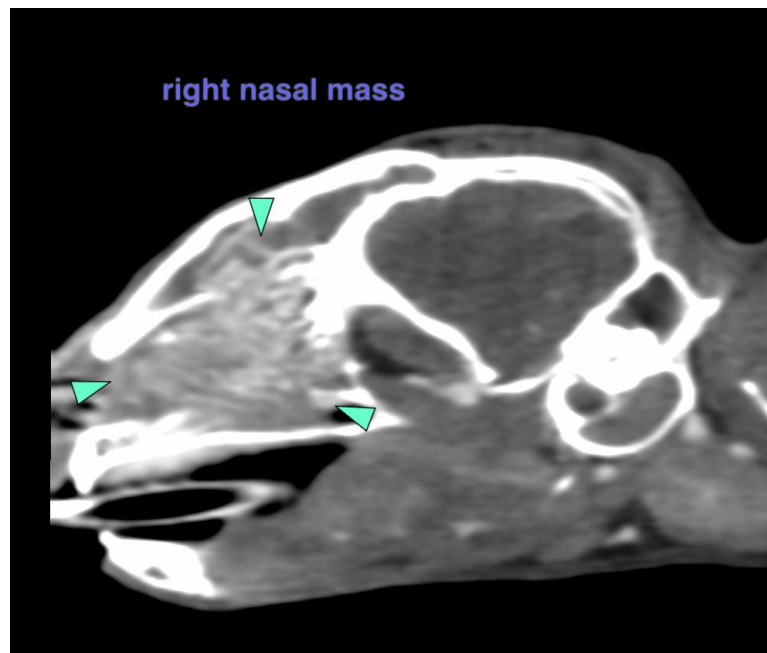
- Secondary obstructive sinusitis right frontal sinus
- Prominent nasopharyngeal tonsils
- Lymphadenopathy mandibular and medial retropharyngeal lymph nodes bilaterally, cranial mediastinal lymph nodes and right tracheobronchial lymph node
- Bilateral otitis media
- 'Tree-in-bud' pattern peripheral bronchial segments without air-trapping
- Resorption atelectasis right middle lung lobe
- Multiple absent teeth

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The right nasal soft tissue material is highly concerning for primary nasal neoplasia and along with the lymphadenopathy the odds for underlying lymphoma are high. Rhinoscopy including biopsy can be performed for specification. The Adam tumor stage is 1.

FNA sampling of the enlarged regional lymph nodes of the skull is beneficial as well.

The tree-in-bud pattern in combination with the history is considered as a sequela to feline bronchial disease and chronic resorption atelectasis of the right middle lung lobe.





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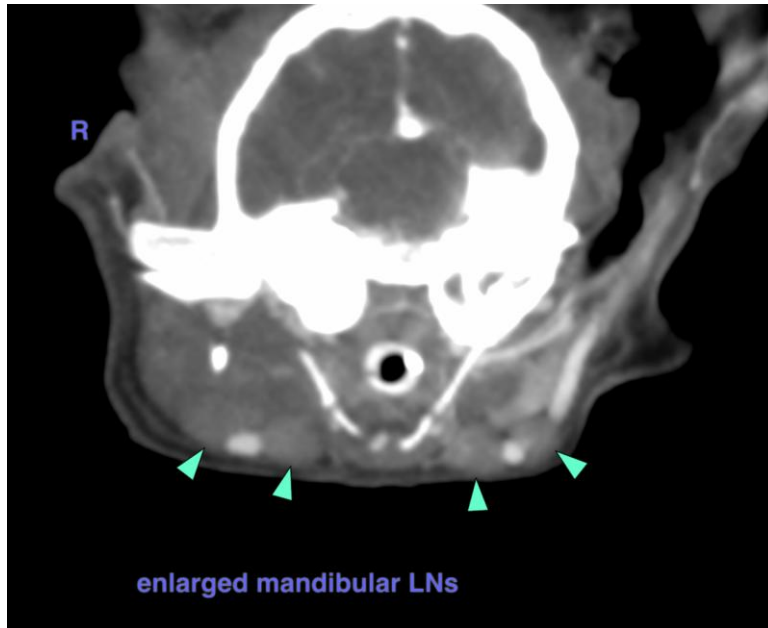
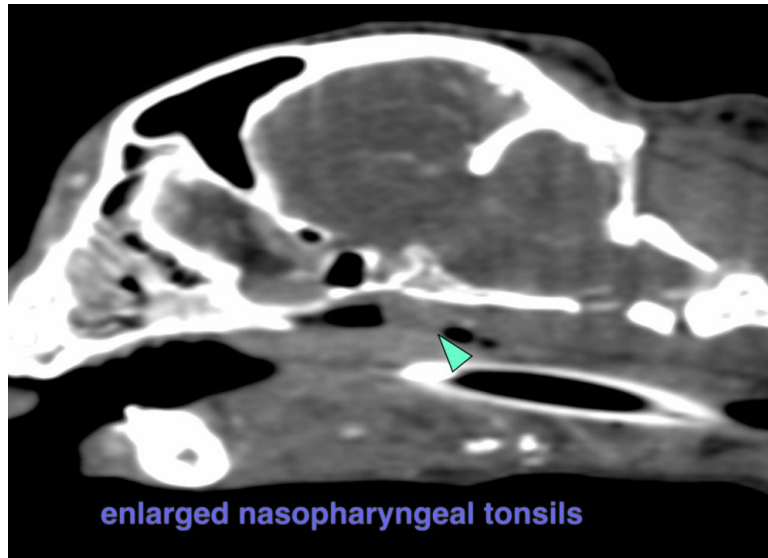
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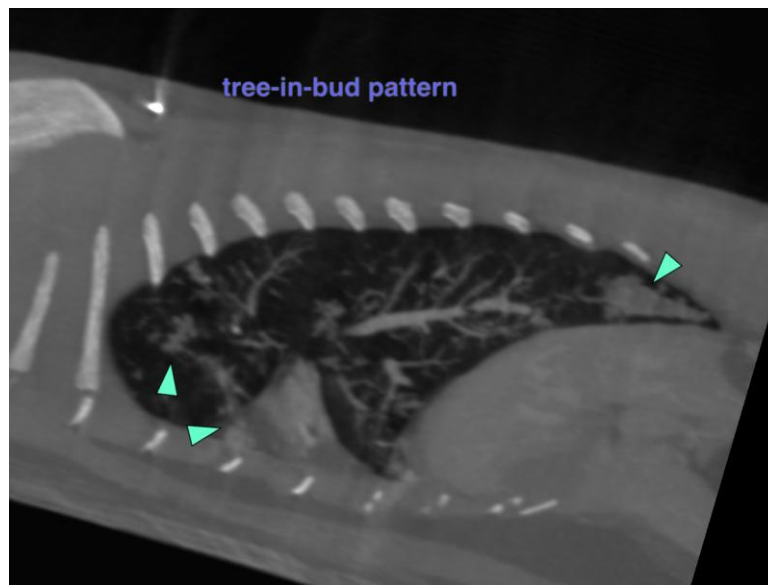
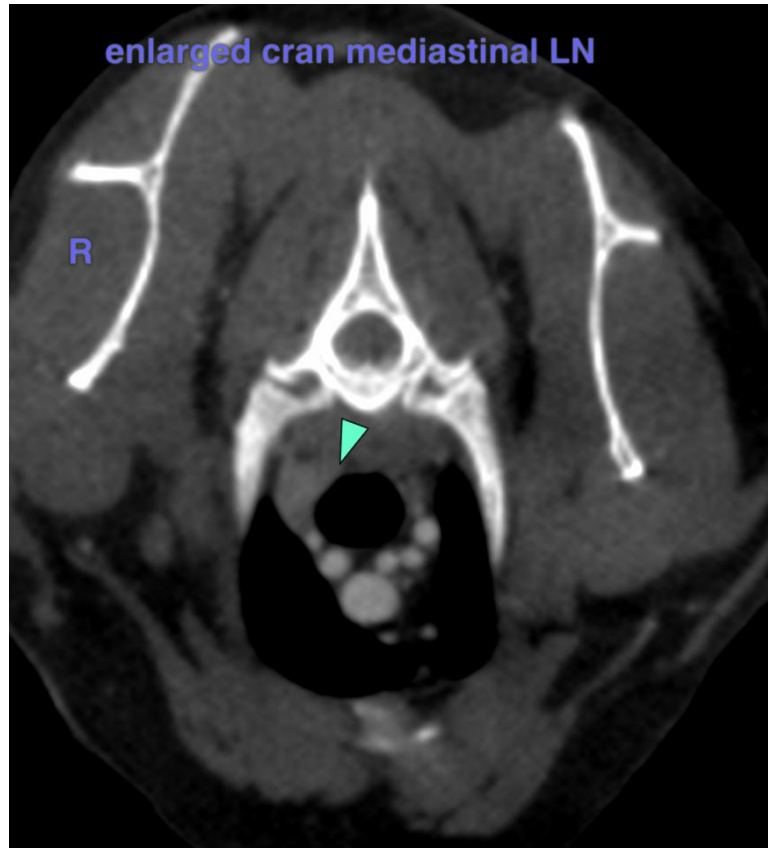
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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