



PATIENT PRESENTING CLINICAL SIGNS

Balsa Hom
 Balsa presented for mass on left side of neck. This was first noted in October and grew over 1 week period.
 Abnormal PE/Chem/CBC/UA Results: low Lym high Neu low phosphorus high total protein high globulin high glucose

SPECIES

Feline

COMPUTED TOMOGRAPHY OF THE NECK

A plain CT study of the neck is provided for review.

BREED

COMPUTED TOMOGRAPHIC FINDINGS

Domestic Short Hair

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

SEX

F

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

AGE

11 Years

The right tympanic bulla is filled with soft tissue attenuating material and the osseous lining of the right tympanica bulla is mildly thickened and smooth. The external ear canals are within normal limits.

The mandibular lymph nodes bilaterally are prominent and uniform soft tissue attenuating .

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

In the region of the left medial retropharyngeal lymph node, an ill-defined uniform soft tissue attenuating mass is visible, measuring approximately 2.4 x 1.8 x 3.9 cm in size. The trachea & larynx are displaced to the right by the mass effect.

An esophageal tube is noted.

HOSPITAL NAME

Animal Surgical
 Center

The osseous structures of the neck are within normal limits.

COMPUTED TOMOGRAPHIC DIAGNOSIS

REFERRING VET

Dr. Short

- Soft tissue mass left aspect of the neck, region of the left medial retropharyngeal lymph node
- Suspect lymphadenopathy mandibular lymph nodes
- Right sided otitis media

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

48821

The findings are consistent with the history of a soft tissue mass at the left ventrolateral aspect of the neck, due to its position I consider the odds for a mass originating from the left medial retropharyngeal lymph node high. Differentials are primary neoplasia - such as round cell tumor, carcinoma -, metastasis or marked reactive hyperplasia/granulomatous inflammation (but no sign for overt surrounding steatitis). Unfortunately, further definition of the mass in the plain CT study is limited. If not done so yet, recommend FNA sampling/biopsy.

DATE

12-6-21



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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.

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