



PATIENT PRESENTING CLINICAL SIGNS

Sapphira Neris Patient was presented for evaluation of persisting otitis/neurological symptoms. Has been evaluated before by Dr.Cynthia Vega for same symptoms. Patient had imbalance, lethargy, head tilt and ataxia. She was treated for otitis with tresaderm and amoxi-clav. Owner did not see improvement. Owner changed diet to RC digestive care diet and appetite improved. Has been hiding. She is not circling. She is not playing with other cats. Does not have history of trauma.

SPECIES Feline Does not have vomiting or diarrhea. Has been defecating and urinating normally. head tilt to the right. leaning and falling to the right.absent menace response and palpebral reflex OD/ present PLR - right facial paralysisBCS 4/9. muscle was ting white chunky material ADCBC - lymphopenia, eosinopenia chemistry - decreased creatinine. hyperglobulinemia. decreased ALT radiographs - no abnormalities seen DWO ddx otitis media/interna vs neoplasia vs polyp vs trauma.

BREED DSH Calico Abnormal PE/Chem/CBC/UA Results: CBC --- LYM mild decreased and EOS severe decreased CHEM --- ALT severe decreased, CREA mild decreased and GLOB mild increased

SEX COMPUTED TOMOGRAPHY OF THE SKULL

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

COMPUTED TOMOGRAPHIC FINDINGS

AGE The pictured parts of the dentition are complete and unremarkable in all jaw quadrants.

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

INTERPRETED BY

Sebastian Schaub, DVM Dr. med. vet. DipECVDI Centered on the horizontal segment of the right external ear canal/right tympanica bulla, an ill-defined soft tissue mass with multifocal amorphous mineralization is visible. The mass is extending rostrally up to the caudal aspect of the right ramus of the mandible and caudally up to the level of the right ala of C1. Medially the mass is in close contact with the calvarium presenting extensive permeative osteolytic lesions with perforation of the cranial fossa and the mass is mildly bulging into the cranial fossa with mild mass effect on the right telencephalon. There is extensive lysis of the zygomatic process of the right temporal bone and zygomatic arch and sphenoid bone. In the medial aspect the mass is distorting the nasopharynx.

REFERRING VET

In the left external ear canal, a mild amount of non-contrast enhancing soft tissue material is visible.

Dr. M. Martes, DVM 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.

INVOICE

48806 The right mandibular & medial retropharyngeal lymph nodes are prominent and present a mild heterogenous contrast enhancement pattern.

DATE

12-6-21 The mandibular salivary glands present a post contrast lobulated pattern and are of normal size and shape. The right mandibular salivary gland is displaced by the auricular mass. The thyroid glands are prominent.



PATIENT

Sapphira Neris

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Dr. med. vet. DipECVDI

HOSPITAL NAME

Veterinary Image
Center

REFERRING VET

Dr. M. Martes, DVM

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COMPUTED TOMOGRAPHIC DIAGNOSIS

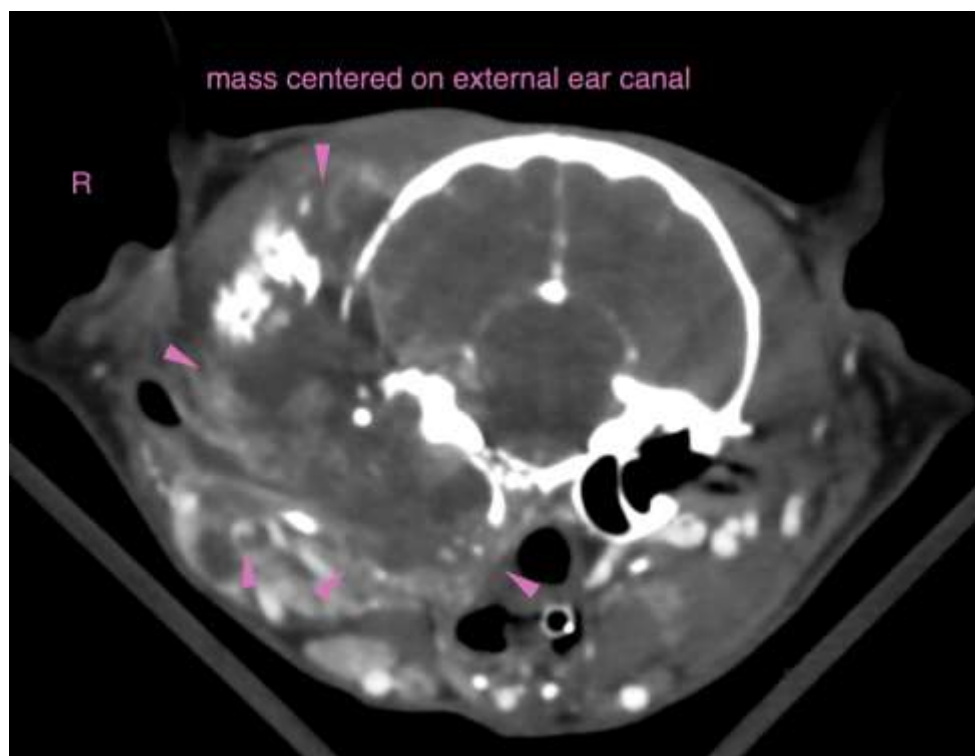
- Large mass with dystrophic mineralization centered on the right external ear canal/tympanic bulla
- Secondary polyostotic aggressive osteolytic lesions with perforation of the cranial fossa
- Lymphadenopathy right mandibular and medial retropharyngeal lymph node
- Enlarged thyroid glands

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are compatible with biologically aggressive soft tissue neoplasm likely originating from the right external ear canal. Differentials include squamous cell carcinoma, ceruminous gland adenocarcinoma, melanoma, fibrosarcoma, other. The mass causes extensive osteolytic lesions of the calvarium zygomatic arch and due to its location the cranial nerve deficits can be explained. Unfortunately, there are no feasible treatment options, but palliative management. The long-term prognosis is infaust.

The enlarged lymph nodes are highly suggestive for metastatic disease.

The enlarged thyroid glands are suggestive for (non)functional hyperplasia or adenoma formation.





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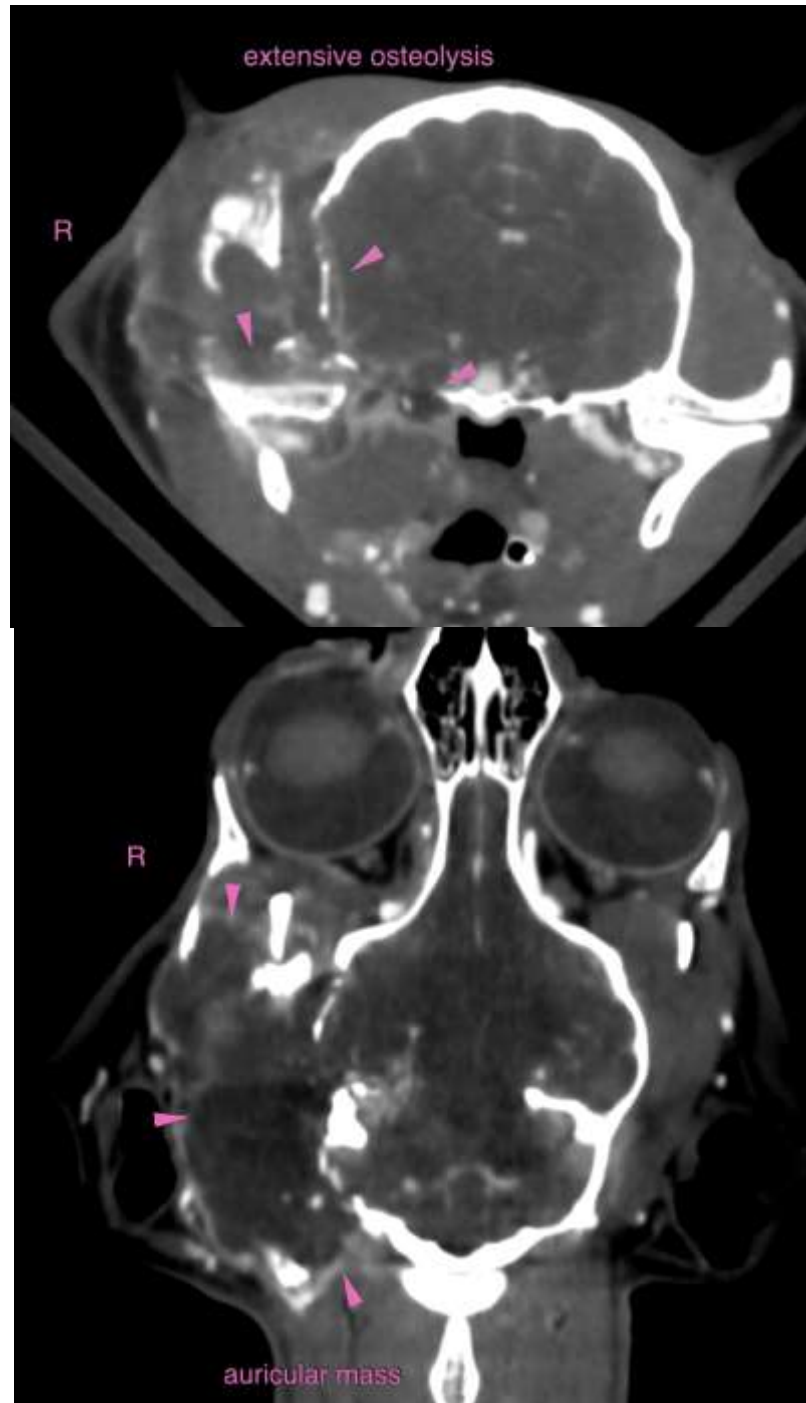
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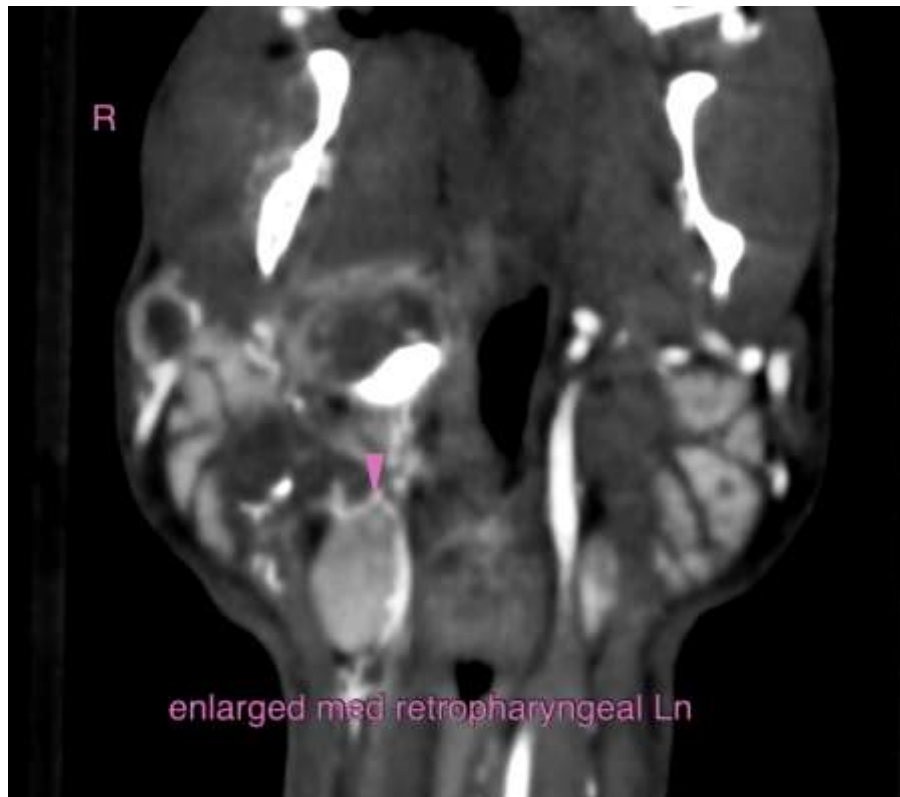
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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