



PATIENT

Royce Central Dakota

PRESENTING CLINICAL SIGNS

chronic upper respiratory congestion and discharge x 1 1/2 -2 years, has been on regular convenia injections, previously treated with azithromycin and clavmox. FIV positive. 16 months ago was treated for an abscess along left jaw. Was initially found as a stray over 2 years ago. At today's exam: stridor still present, all upper respiratory sounds.

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: FIV positive. Chemistry & CBC essentially within normal limits. Stridor

BREED

Domestic Shorthair

COMPUTED TOMOGRAPHY OF THE SKULL

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

COMPUTED TOMOGRAPHIC FINDINGS

SEX

MN

Multiple incisor teeth are absent.

Extensive destruction of the nasal conchal & turbinate structures is seen, R>L.

AGE

3 Years

The right tympanic bulla is filled with peripheral contrast enhancing soft tissue material and the osseous lining is moderately irregular thickened. A polypoid lesion is extending from the orifice of the right auditory tube into the nasopharynx, occupying the complete cross-sectional area of the nasopharynx at the same level. The osseous segment of the right auditory tube is significantly widened and a contrast enhancing stalk is connecting to the nasopharyngeal polypoid lesion.

Early stage of lysis of the tympanic part of the right temporal bone is seen.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

The left tympanic bulla contains a moderate amount of non-contrast enhancing soft tissue material.

HOSPITAL NAME

Casselton Vet Service

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

The external ear canals are within normal limits.

REFERRING VET

Laurie Huckle

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 right medial retropharyngeal lymph node is prominent.

INVOICE

48910

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Destructive rhinitis, R>>L
- Bilateral chronic otitis media, R>>L
- Right sided nasopharyngeal inflammatory polyp with upper airway obstruction
- Reactive hyperplasia right medial retropharyngeal lymph node
- Multiple absent incisor teeth

DATE

12-8-21



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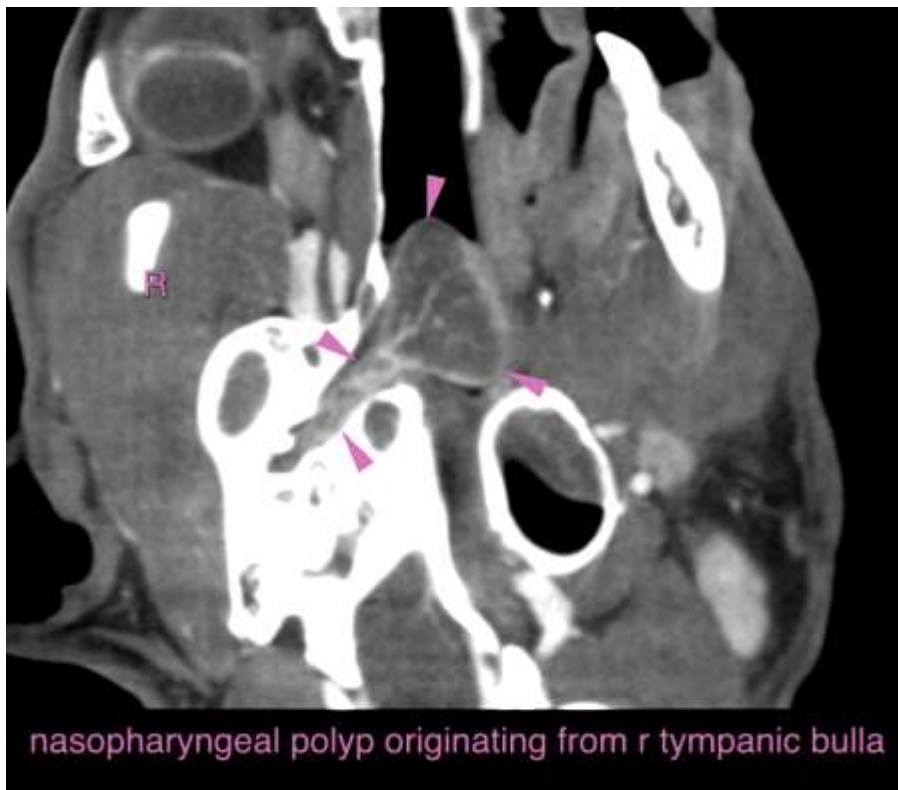
DATE

12-8-21

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are consistent with an inflammatory nasopharyngeal polyp, originating from the right tympanic bulla due to chronic otitis media – likely secondary to ascending infection due to rhinitis. The most common cause for the destructive rhinitis is primary viral with bacterial superinfection, there is a little chance for mycotic superinfection (e.g. Cryptococcus). If not done so yet, extraction of the polyp using traction technique is recommended. A right sided ventral bulla osteotomy is an alternative treatment option.

Rhinoscopy with sampling for microbial culture and feline respiratory panel might be considered for further workup of the rhinitis. Clinical signs of rhinosinusitis are likely to reoccur in chronic cases.





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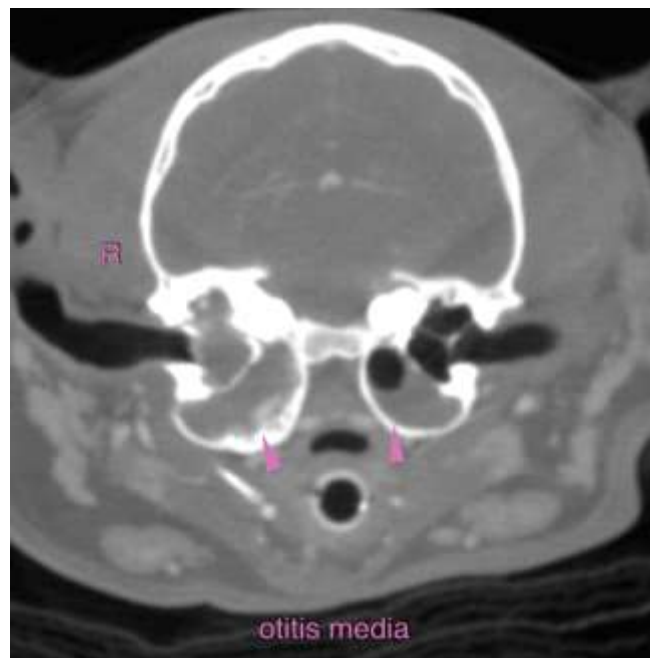
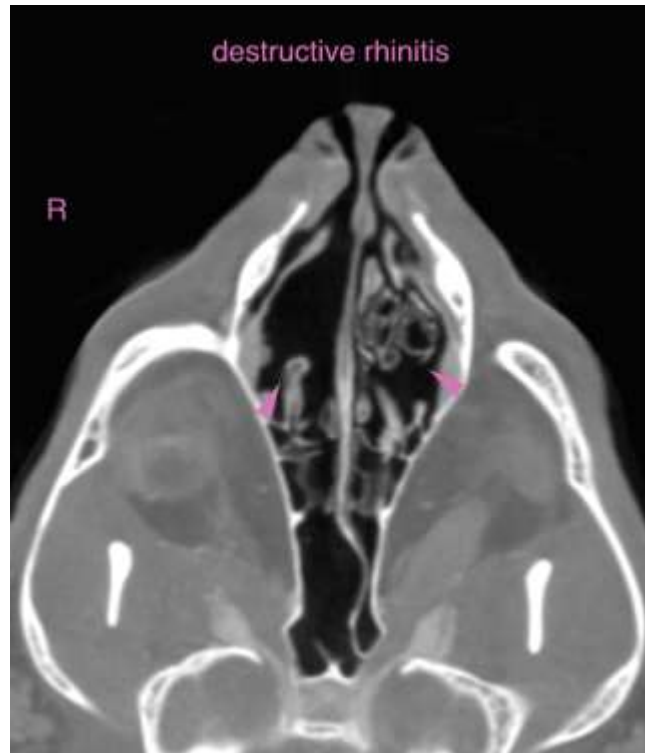
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

BREED

Domestic Shorthair

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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