



**PATIENT PRESENTING CLINICAL SIGNS**

**Weaver Saude** History: Patient was referred by rDVM after a two-month history of shaking head, scratching at ears which progressed to horners, L third eyelid elevation and generalized swelling around the left nare with purulent discharge.

**SPECIES**

**Feline** Abnormal PE/Chem/CBC/UA Results: L eye third eyelid elevated. Purulent nasal discharge, sterdor. Thickened Left nasal area. 204 loose

**COMPUTED TOMOGRAPHIC STUDY OF THE SKULL, THORAX AND ABDOMEN**

**BREED**

**DSH** A high resolution post contrast CT study of the skull is provided for review.

**COMPUTED TOMOGRAPHIC FINDINGS**

**SEX**

Multiple teeth are absent.

**Neutered Male**

The nasal cavity bilaterally, L>R, is filled with soft tissue attenuating, heterogeneous contrast enhancing material, extending caudally up to the level of the choana. Advanced destruction of the nasal conchal and turbinate structures is visible. The maxillary and palatine bone bilaterally as well as the vomer present advanced permeative osteolytic lesions and multifocal immature periosteal new bone formation. The nasal mass is bulging into the subcutaneous tissue along the nose bilaterally. In the left aspect the mass is dissecting along the alveolar process of the left maxillary bone into the ventral & caudal aspect of the left orbit.

**AGE**

**13 Years**

**INTERPRETED BY**

**Sebastian Schaub,  
DVM Dr. med. vet.  
DipECVDI**

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.

**HOSPITAL NAME**

**Wilvet Salem**

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.

**REFERRING VET**

**Dr. Crystal Ebert**

The medial of the left mandibular lymph nodes is prominent.

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**INVOICE**

**12872**

- Biologically aggressive nasal soft tissue neoplasia extending into the left orbit
- Secondary polyostotic aggressive osteolytic lesions of the maxillary and palatine bone bilaterally and the vomer
- Lymphadenopathy left mandibular lymph node
- Multiple absent teeth

**DATE**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**



**PATIENT**

Weaver Saude

The findings are compatible with biologically aggressive nasal neoplasia with secondary polyostotic aggressive osteolytic lesions of the associated osseous structures and extension of the mass into the left orbit. Differentials include lymphosarcoma, squamous cell carcinoma, melanoma, other. Recommend FNA sampling/biopsy for further definition. Advanced palliative treatment options should be discussed with oncologist, based on the results of the advanced diagnostic tests.

**SPECIES**

Feline

The prominent mandibular lymph node is suggestive for metastatic spread, recommend FNA sampling.  
Consider full tumor staging.

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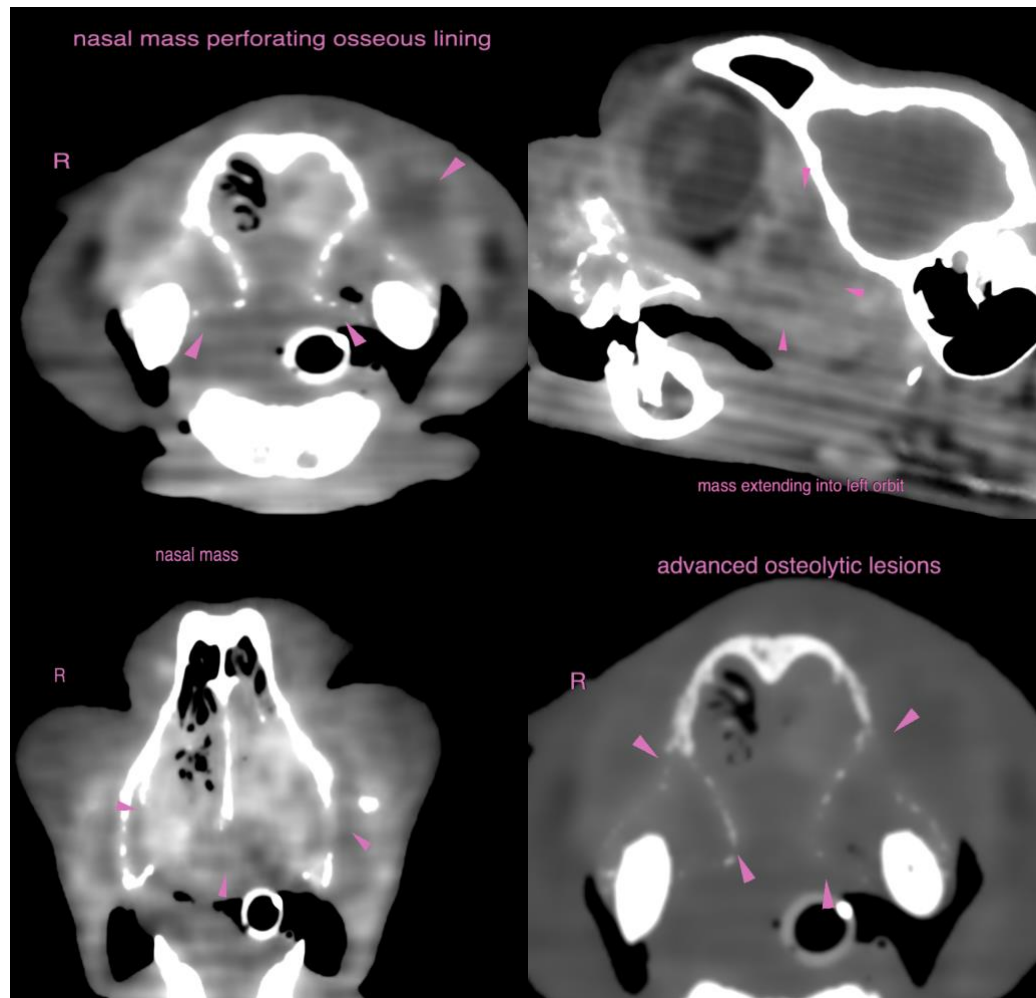
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



**PATIENT**

Weaver Saude

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.

**SPECIES**

Feline

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