



**PATIENT PRESENTING CLINICAL SIGNS**

Tigger Young History of stertorous breathing since 2020 with mild improvement following course with doxycycline. Area of suspected nasopharyngeal collapse on retroflex view with rhinoscopy  
Abnormal PE/Chem/CBC/UA Results: mild azotemia

**SPECIES COMPUTED TOMOGRAPHY OF THE SKULL, THORAX AND ABDOMEN**

Feline A pre- and post-contrast CT study of the skull, thorax and abdomen in a bone, lung and soft tissue reconstruction are provided for review.

**BREED COMPUTED TOMOGRAPHIC FINDINGS**

DSH Skull

**SEX** All teeth are absent, and generalized atrophy of the alveolar bone in all jaw-quadrants is appreciated.

**MN** The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining. The nasopharynx contains a mild amount of foamy soft tissue material.

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

**INTERPRETED BY** Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI Both tympanic bullae are filled with soft tissue attenuating and non-contrast enhancing soft tissue material. The osseous lining of the tympanic bullae is mildly thickened and smooth. The external ear canals are within normal limits. In the subcutaneous tissue at the medial aspect of the base of the right pinna, a multicameral, soft tissue attenuating and peripheral contrast enhancing mass, measuring 1.7 x 1.7 x 2.1 cm, is visible.

**HOSPITAL NAME** Animal Health Partners Attached to the parietal bone, a small (4.1 x 1.8 x 4.4 mm), plaque like, mild heterogeneous mineralized and moderate contrast enhancing lesion is seen.

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. Westgarth The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

**INVOICE** Thorax

50014 Multifocal spondylosis formation is seen along the thoracic spine and level C2/C3.

**DATE** The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

2-1-22 The cardiovascular structures including the pulmonary vasculature are within normal limits.



**PATIENT**

Tigger Young

Generalized mild to moderate thickening of the bronchial walls is seen.

The right cranial lung lobe is consolidated and presents a markedly decreased volume, air-bronchograms are visible. The lung parenchyma presents the expected architecture and attenuation behavior.

**SPECIES**

Feline

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

**BREED**

DSH

Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

**SEX**

MN

The volume of the left kidney is mildly decreased, and the margins are irregular. A small amount of mineral attenuating material is associated with the left renal pelvis. The right kidney presents without abnormalities.

**AGE**

15 Years

The adrenal glands are within normal limits for size, shape and organ architecture with small punctuate mineralization.

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

A mild amount of mineralized biliary sludge is seen in the gallbladder. Multiple intrahepatic biliary vessels are distended by mineral attenuating material.

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

**HOSPITAL NAME**

Animal Health  
Partners

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

The vertebral endplates of the lumbosacral junction present mild to moderate spondylosis formation.

**REFERRING VET**

Dr. Westgarth

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

**INVOICE**

50014

**DATE**

2-1-22

- Multiloculated subcutaneous soft tissue mass base of right pinna
- Intracranial extraaxial small plaque like mass dorsolateral level with left parietal lobe
- Bilateral otitis media
- Bronchial lung pattern
- Resorption atelectasis right cranial lung lobe
- Left sided chronic nephropathy
- Left sided mild nephrolithiasis without signs of obstruction
- Mineralized biliary sludge and mineralization of the biliary tree – can be a sequela to preceding inflammation or parasitic infection
- Current state post complete dental extraction
- Mild adrenal mineralization, incidental



**PATIENT**

Tigger Young

- Spondylosis deformans

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

There is a cavitated soft tissue mass level with the base of the right pinna, consider FNA sampling for further definition or excisional biopsy to rule out malignant neoplasia.

**SPECIES**

Feline

The small extraaxial contrast enhancing lesion attached to the left parietal bone is highly suggestive for a small meningioma and considered as an incidental finding at this point.

**BREED**

DSH

Although the nasopharynx is collapsed in the current CT study, as the patient is under general anesthesia the clinical relevance is unclear and findings need to be correlated with the clinical signs and the findings from the endoscopic evaluation of the nasopharynx.

**SEX**

MN

Due to the lack of clinical signs, the bilateral otitis media is considered an incidental finding, but might indicate disturbed drainage by the auditory tube due to altered function of the nasopharynx. There is no evidence of polyp formation.

**AGE**

15 Years

The bronchial lung pattern is compatible with feline bronchial disease and primary inflammatory origin (e.g. eosinophilic, neutrophilic) ± bacterial/viral superinfection is considered likely. Secondary resorption atelectasis fo the right cranial lung lobe, suspect preceding mucus plugging or pneumonia.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Animal Health  
Partners

**REFERRING VET**

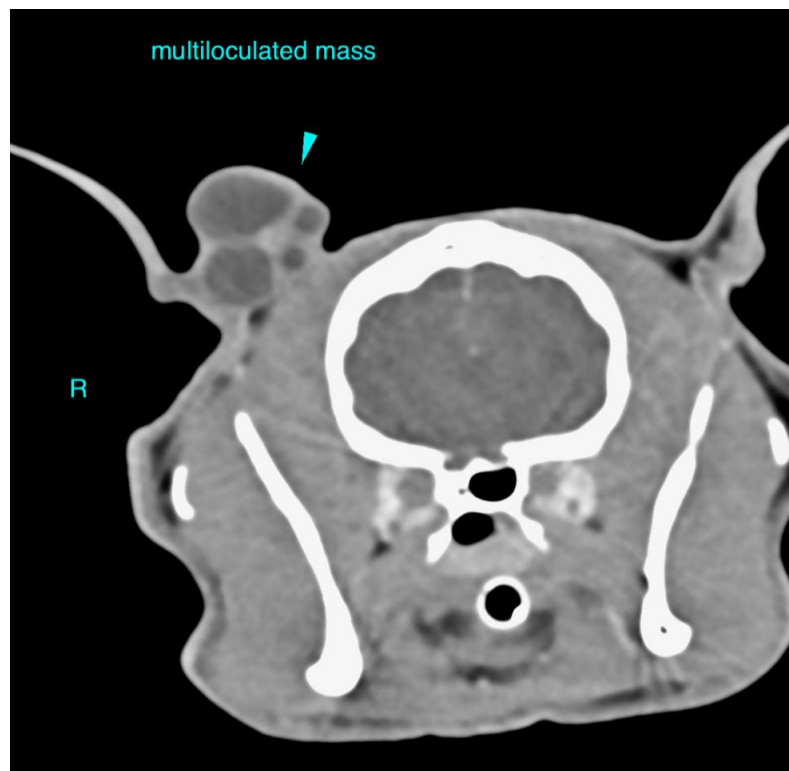
Dr. Westgarth

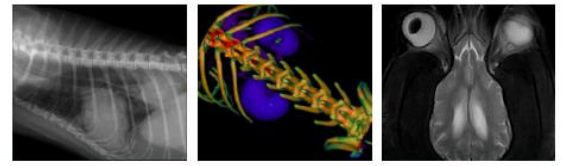
**INVOICE**

50014

**DATE**

2-1-22





**PATIENT**

Tigger Young

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**AGE**

15 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Animal Health  
Partners

**REFERRING VET**

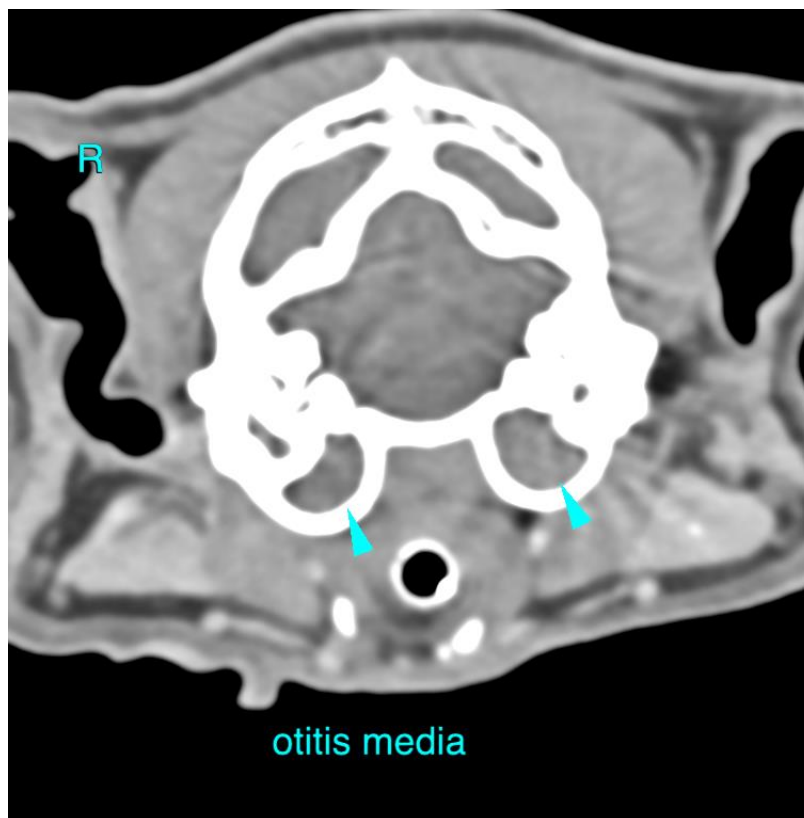
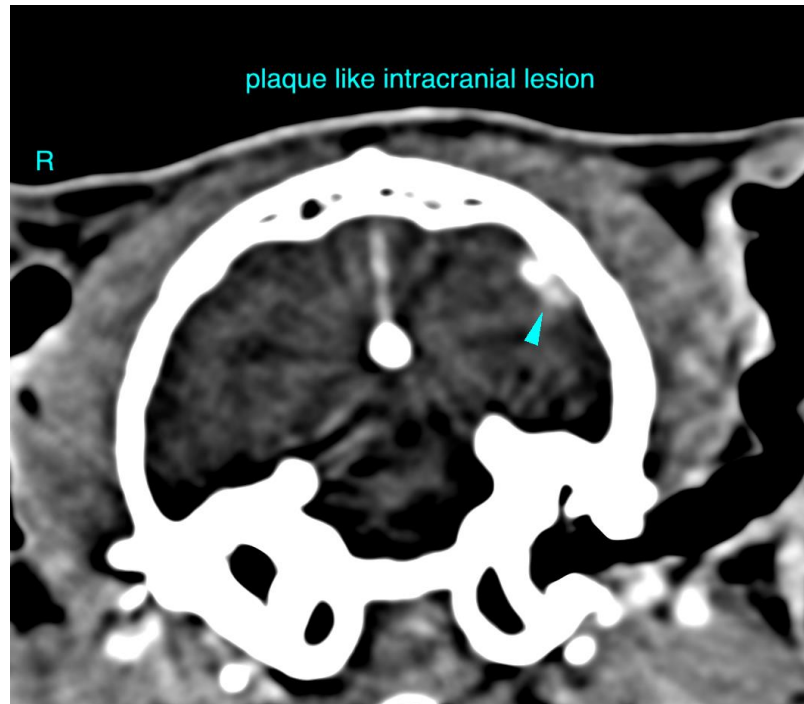
Dr. Westgarth

**INVOICE**

50014

**DATE**

2-1-22





**PATIENT**

Tigger Young

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**AGE**

15 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Animal Health  
Partners

**REFERRING VET**

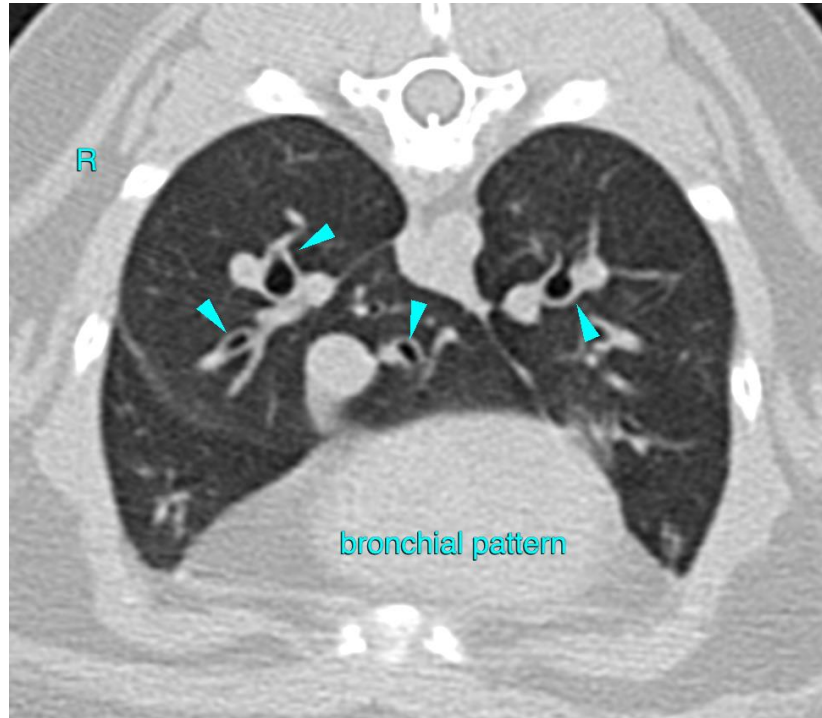
Dr. Westgarth

**INVOICE**

50014

**DATE**

2-1-22



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  
sebast.schaub@gmail.com