



PATIENT

Survivor Almost
Home Rescue

PRESENTING CLINICAL SIGNS

Severe dental disease.

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

SPECIES

Feline

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

BREED

DSH

SEX

MN

AGE

9 Years

COMPUTED TOMOGRAPHIC FINDINGS

Skull

All teeth but triadan 202, 208, 402 and 403 are absent. Multiple small fragments of the tooth roots of the absent teeth are seen throughout the alveolar bone. A marked amount of mineral attenuating material is attached to triadan 208 and moderate widening of the periodontal space of the respective roots is visible. Moderate atrophy of the alveolar bone in all jaw quadrants is present with geographic osteolytic lesions of the alveolar process of the maxillary bone bilaterally.

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

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

The right external ear canal is occupied by homogeneous soft tissue attenuating and heterogeneous moderate contrast enhancing material. The right tympanic bulla contain a mild amount of non-contrast enhancing soft tissue material. In the soft tissue lateral to the right tympanic bulla, a well-defined, roundish, mineralized body measuring 6.3 mm in diameter is visible. The left tympanic bulla is filled with peripheral mild contrast enhancing material, protruding into the horizontal segment of the left external ear canal.

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 submandibular and medial retropharyngeal lymph nodes are prominent.

Thorax

The bony and surrounding soft tissue structures are within normal limits.

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.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

Generalized mild thickening of the bronchial walls is seen with regions of peribronchial consolidation of the lung parenchyma – presenting a decreased volume.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Animal Surgical
Center

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

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In the pictured parts of the cranial abdomen, a large, irregular marginated, uniform soft tissue attenuating and heterogeneous contrast enhancing mass is partially included in the field of view.

SPECIES

Feline

- Abdominal soft tissue mass
- Soft tissue mass right external ear canal
- Left sided contrast enhancing soft tissue material in left tympanic bulla, extending into left external ear canal

BREED

DSH

- Bilateral otitis media
- Multiple absent teeth with atrophy and chronic osteitis of the alveolar bone
- Periodontal disease 208 and dental tartar
- Lymphadenopathy mandibular and medial retropharyngeal lymph nodes bilaterally
- Bronchial lung pattern with peribronchial pulmonary consolidation cranial lung lobes
- Suspect right sided retropharyngeal nodular fat-necrosis

SEX

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

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The main finding is the abdominal mass, partially included in the field of view, most likely originating from a mesenteric lymph node or intestinal tract. Neoplasia such as lymphosarcoma or carcinoma are the top differentials here. Recommend FNA sampling for further definition.

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The soft tissue proliferation of the right external ear canal is equivocal for proliferative chronic otitis externa with potential inflammatory polyp formation or neoplastic transformation. The findings of the left tympanic bulla and the soft issue lesion protruding into the left external ear canal is suggestive for inflammatory polyp. Recommend otoscopy including biopsy bilaterally to rule out malignant transformation.

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Suspect secondary reactive hyperplasia of the tributary lymph nodes of the skull – consider FNA sampling to confirm the diagnosis.

The bronchial lung pattern with the peribronchial alveolar lesions is compatible with feline bronchial disease and peribronchial pneumonitis/atelectasis.

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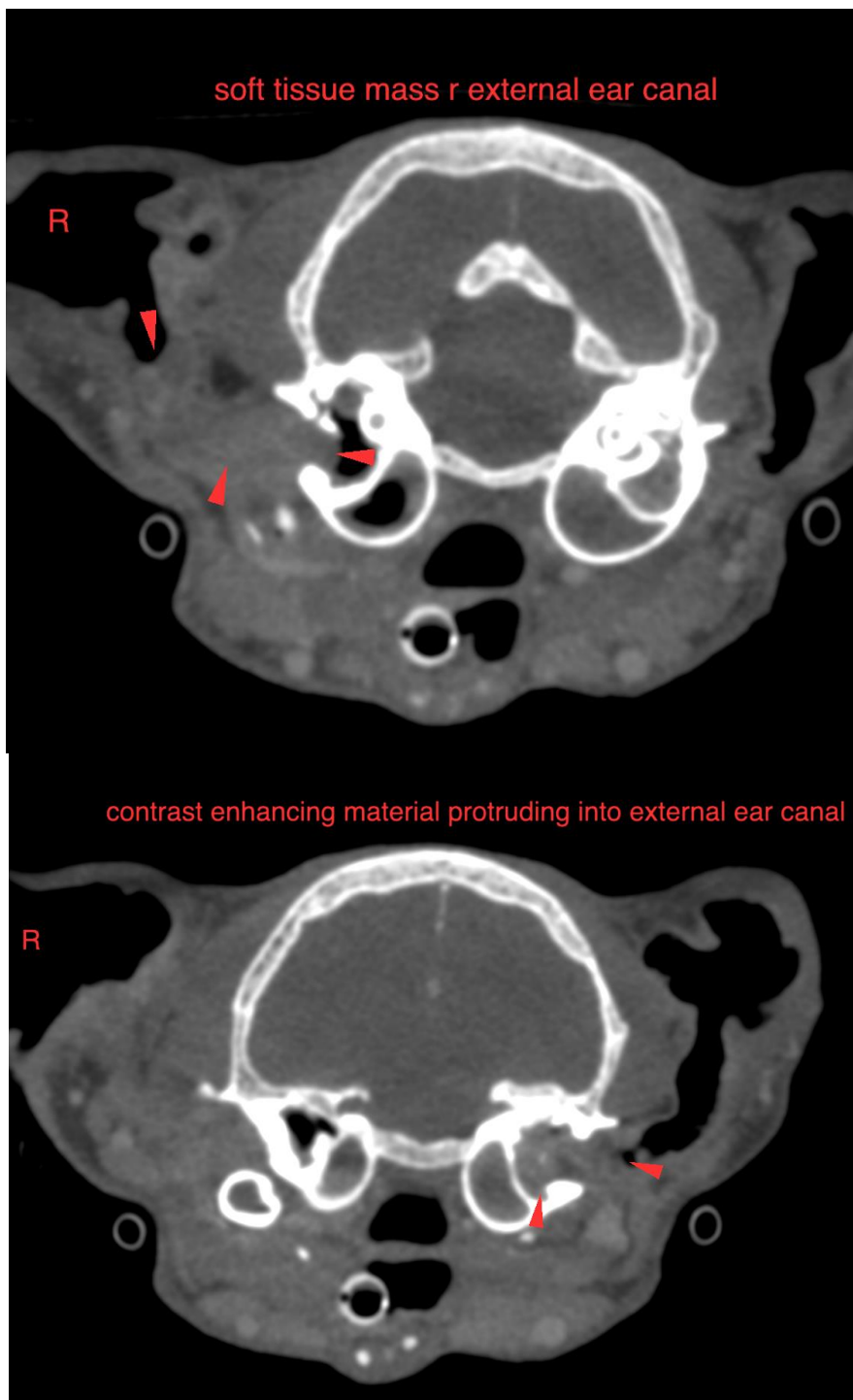
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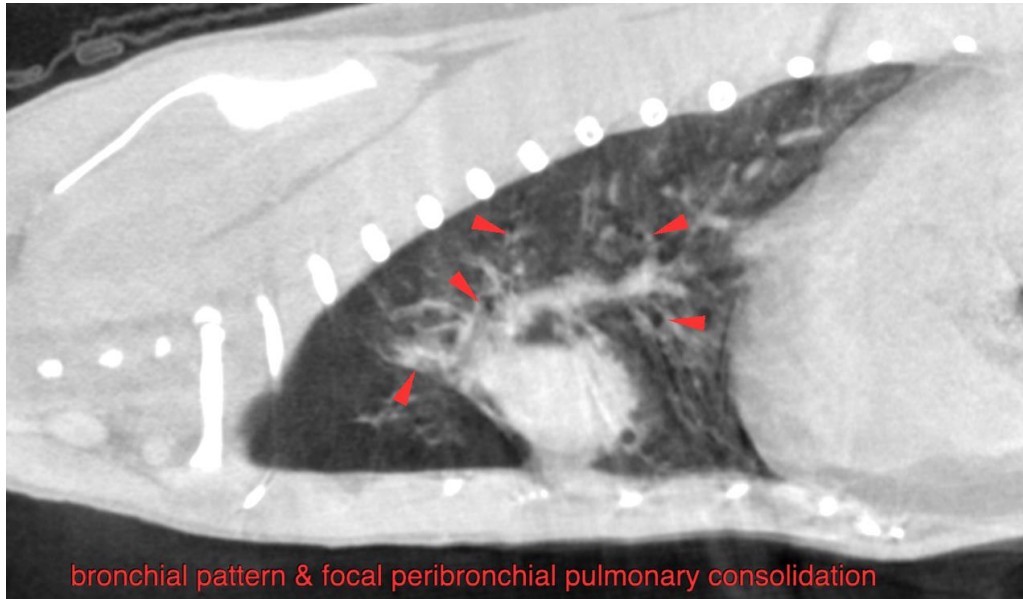
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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