



PATIENT

Herbie Middleton

PRESENTING CLINICAL SIGNS

History of vomiting, retching, gagging during + after eating. NAD on initial xrays taken 8th Feb. RV 17th Feb - epiglottis adhered to root of tongue. Adhesions broken down to release. No improvement since.

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: PABs taken today UREA 5.0 mmol/L Glob 53 g/L

COMPUTED TOMOGRAPHY OF THE SKULL

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

BREED

DSH

COMPUTED TOMOGRAPHIC FINDINGS

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

SEX

Neut Male

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining. A small amount of fluid attenuating material is attached to the mucosal lining of the epiglottis. The epiglottis is thickened and malformed and has a heterogeneous contrast enhancement pattern.

AGE

3 Years, 10 Months

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.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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 small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

HOSPITAL NAME

Myerscough
Veterinary Group

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Misshapen and thickened epiglottis

REFERRING VET

Katerina Sakarska

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The misshapen and thickened epiglottis can be a sequela to preceding inflammation with entrapment of the epiglottis - referring to the history - or is a congenital abnormality. The changes of the epiglottis are a plausible explanation for the persistent clinical signs. Unfortunately, further assessment of the epiglottis by CT is limited and the findings need to be correlated with the clinical findings. Biopsy or cyto-brush should be used to rule out malignant transformation (e.g. lymphosarcoma).

INVOICE

56931

DATE

2-22-23



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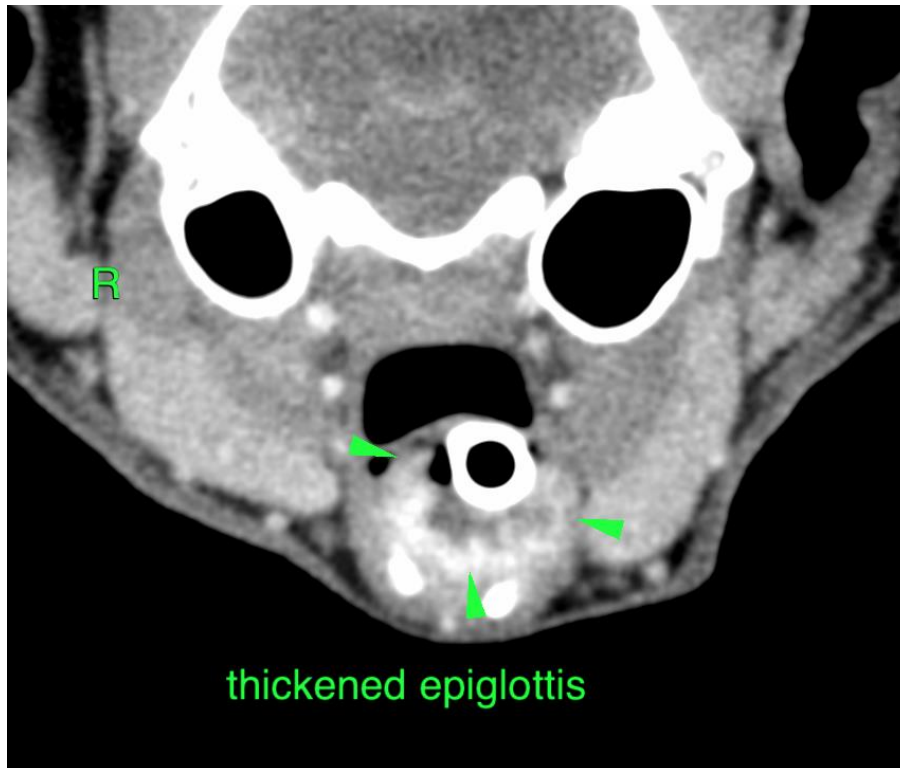
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
sebast.schaub@gmail.com