



PATIENT PRESENTING CLINICAL SIGNS

Lolita Forrest Concern for inner ear mass/polyp. - Chronic oral stomatitis treated with Depo-Medrol q 8 weeks. See attached photo. She has facial discomfort and presses hard into hand when manipulating her head. Voice recently changed.

SPECIES Abnormal PE/Chem/CBC/UA Results:

Feline COMPUTED TOMOGRAPHY OF THE SKULL AND THORAX

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

BREED

DSH COMPUTED TOMOGRAPHIC FINDINGS

Skull

SEX All teeth but triadan 302-304 and 404 are absent. The alveolar bone presents a moderate atrophy in all jaw quadrants. A small retained fragment of the tooth root of triadan 309 is noted within the alveolar bone. The mucosal lining in the region of the oropharynx is prominent and appears irregular.

FS

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

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

INTERPRETED BY 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.

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.

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The submandibular and medial retropharyngeal lymph nodes are prominent, uniform soft tissue attenuating and contrast enhancing.

REFERRING VET

Thorax

Borecky

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

The thymus can be appreciated in the cranioventral mediastinum and is prominent for the age of the patient.

INVOICE

50515

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.

DATE

2-23-22

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



PATIENT The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

Lolita Forrest

The right cranial lung lobe presents with a plate-like atelectasis and zones with dystelectasis of the lung parenchyma.

SPECIES

Feline

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

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- Suspect mucosal swelling oropharynx
- Lymphadenopathy mandibular and medial retropharyngeal lymph nodes bilaterally
- Prominent thymus
- History of dental extractions
- Plate like atelectasis and small zones of dystelectasis of the lung parenchyma, otherwise unremarkable.
- No evidence of otitis externa, media or interna

SEX

FS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

6 Years

The mucosal swelling of the oropharynx can be most consistent with the history of chronic stomatitis – e.g. eosinophilic or lymphoplasmacytic inflammation – and can be a cause for pain. No other abnormalities are appreciated as source for the pain.

INTERPRETED BY

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The enlarged tributary lymph nodes of the skull are compatible with reactive hyperplasia, recommend FNA sampling to rule out neoplastic transformation (e.g. round cell tumor).

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The thymus is prominent which is an atypical finding for the age of the patient, however there are no overt signs for malignancy – such as rounding or heterogeneous contrast enhancement pattern – and might still be a normal variant. However, ultrasound guided FNA sampling appears beneficial to rule out malignant transformation.

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PATIENT

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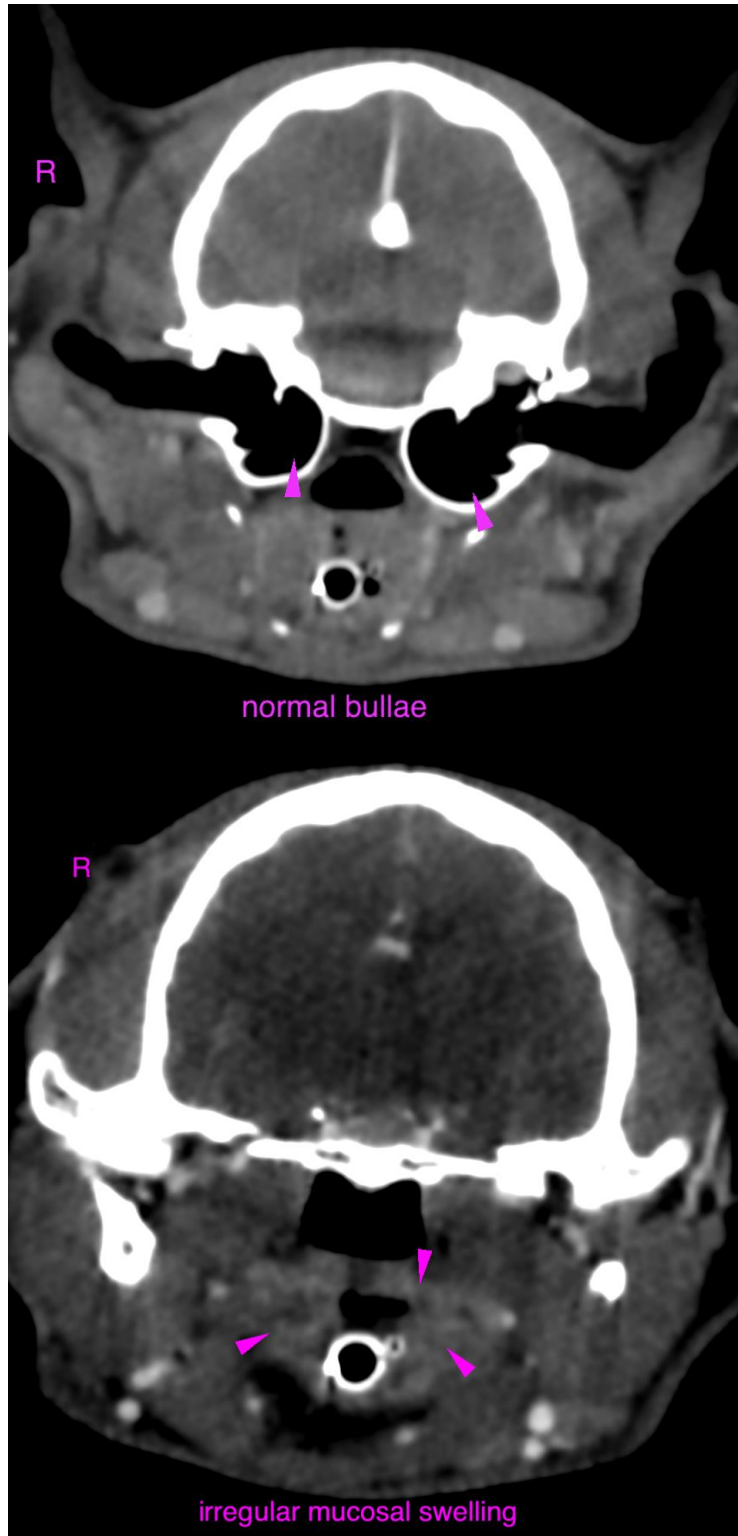
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normal bullae

irregular mucosal swelling



PATIENT

Lolita Forrest

SPECIES

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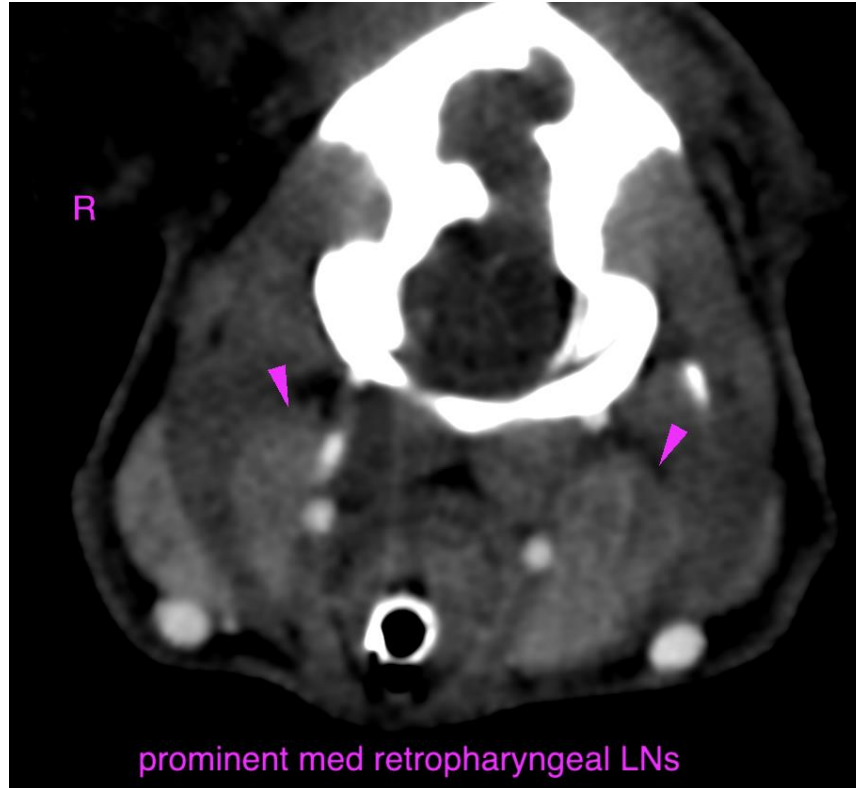
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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