



PATIENT PRESENTING CLINICAL SIGNS

Oliver Neon History: chronic nasal discharge and sneezing
Abnormal PE/Chem/CBC/UA Results:

SPECIES COMPUTED TOMOGRAPHIC STUDY OF THE SKULL

Feline A high-resolution plain CT study of the skull is provided for review.

COMPUTED TOMOGRAPHIC FINDINGS

BREED

DMH

The tooth elements 107, 207, 307 and 407 present with advanced resorptive lesions.

In both nasal cavities, a moderate amount of soft tissue attenuating material is attached to the nasal conchal & turbinate structures. There is evidence of mild to moderate destruction of the nasal conchal structures.

SEX

Neutered Male

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

AGE

10 Years

Both tympanic bullae are filled with uniform soft tissue attenuating material. The osseous lining of the tympanic bullae is smooth and thin. The external ear canals are within normal limits.

COMPUTED TOMOGRAPHIC DIAGNOSIS

INTERPRETED BY

Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

- Destructive rhinitis
- Bilateral otitis media
- Resorptive dental lesions 107, 207, 307 and 407

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Animal Dental Clinic

The findings are consistent with destructive rhinitis. The causative agent is most likely primary viral with bacterial superinfection. Even though unlikely there is a small chance of emerging fungal (cryptococcal) superinfection.

REFERRING VET

Sarah Bonner

Rhinoscopy with biopsy and samples for microbial cultures can be used as advanced diagnostic test. In cases of chronic rhinosinusitis, clinical signs can reoccur.

The bilateral otitis media is considered as a sequela to chronic rhinitis with secondary ascending infection by the auditory tube.

INVOICE

14074

DATE

2/24/22



PATIENT

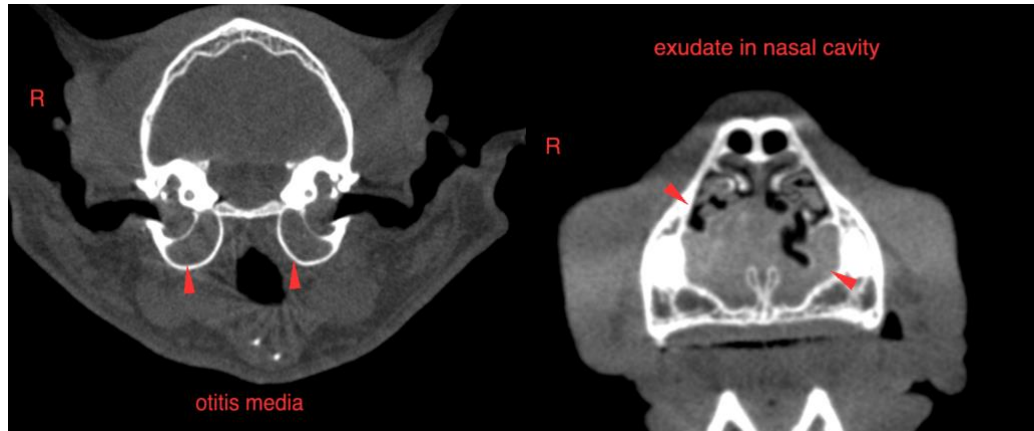
Oliver Neon

SPECIES

Feline

BREED

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Neutered Male

AGE

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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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