



**PATIENT PRESENTING CLINICAL SIGNS**

DT Van Dyne Chief complaint: SNEEZING, DISCHARGE. COUGHING/ HACKING. Hx of present illness symptoms: STARTED ~6 MONTHS AGO. OWNER HAS TAKEN DT TO PDVM TO TRY TO GET ANSWERS. OWNER EXPLAINED PDVM HASN'T BEEN ABLE TO GET AN ANSWER, SO OWNER DECIDED TO COME HERE. NASAL DISCHARGE IS WHITE; NEVER SEEN ANY BLOOD. OWNERS HAVE ANOTHER CAT THAT IS ASYMPTOMATIC. INDOOR ONLY Past medical hx: HAD EMERGENCY SURGERY ON HIS EYE WHEN HE WAS A KITTEN, OWNER UNSURE WHAT SURGERY WAS FOR. HX FELINE HERPES. ASSESSMENT: CHRONIC NASAL DISCHARGE R/O: INFECTIOUS ( FUNGAL VS. BACTERIAL) VS. FOREIGN BODY VS. TOOTH ROOT ABSCESS VS. NASAL PHARYNGEAL POLYP VS. NEOPLASIA VS. OTHER

**SPECIES**

Feline

**BREED**

DSH

**COMPUTED TOMOGRAPHY OF THE SKULL**

A pre- and post-contrast CT study of the skull in a bone and soft tissue reconstruction is provided for review.

**SEX**

MN

**COMPUTED TOMOGRAPHIC FINDINGS**

Multiple teeth are absent and the alveolar bone level with absent 204 presents signs of chronic osseous remodeling.

**AGE**

15 Years

In both nasal cavities, a small amount of fluid attenuating material is attached to the nasal mucosal lining.

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

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

The medioventral compartment of the left tympanic bulla is filled with fluid attenuating material. The osseous lining of the left tympanic bulla is smooth and thin. The external ear canals are within normal limits.

**HOSPITAL NAME**

Green Dog Dental and  
Wellness

Level with the left lateral aperture of the fourth ventricle of the brain, a pre- and post contrast hypoattenuating roundish mass is appreciated, deviating the choroid plexus and distorting the brainstem and cerebellum at the same level.

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.

**REFERRING VET**

Garcia

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Intracranial extraaxial mass left lateroventral aspect caudal cranial fossa, possibly cavitory – level with the petrosal part of the left temporal bone
- Mild rhinitis
- Left sided otitis media
- Multiple absent teeth

**INVOICE**

56986

**DATE**

2-27-23

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

There is an intracranial extraaxial mass in the left lateroventral aspect of the caudal cranial fossa that appears to be cavitory – cystic meningioma is the top differential. Other potentials for possible cystic lesion can include epidermoid cyst, arachnoid cyst or non-contrast enhancing neoplasm (e.g. lymphosarcoma). As there are not respective clinical signs, the finding is



**PATIENT**

DT VanDyne

considered incidental, however progressive growth can result in neurological clinical signs. MRI might be used for further differentiation.

The appreciated rhinitis is commonly primary viral ± bacterial or less likely mycotic superinfection. There is no evidence of a nasal mass or inflammatory polyp. Rhinoscopy including sampling for microbial culture and biopsy can be used for further workup.

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**AGE**

15 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Green Dog Dental and  
Wellness

**REFERRING VET**

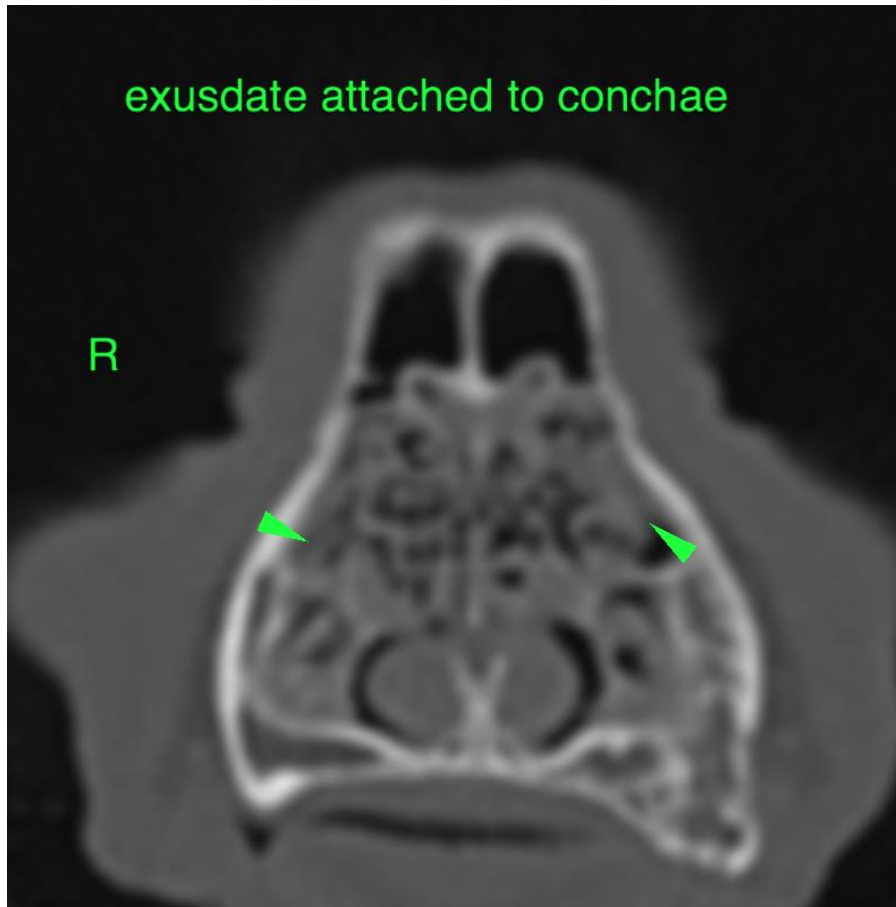
Garcia

**INVOICE**

56986

**DATE**

2-27-23





**PATIENT**

DT Van Dyne

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**AGE**

15 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Green Dog Dental and  
Wellness

**REFERRING VET**

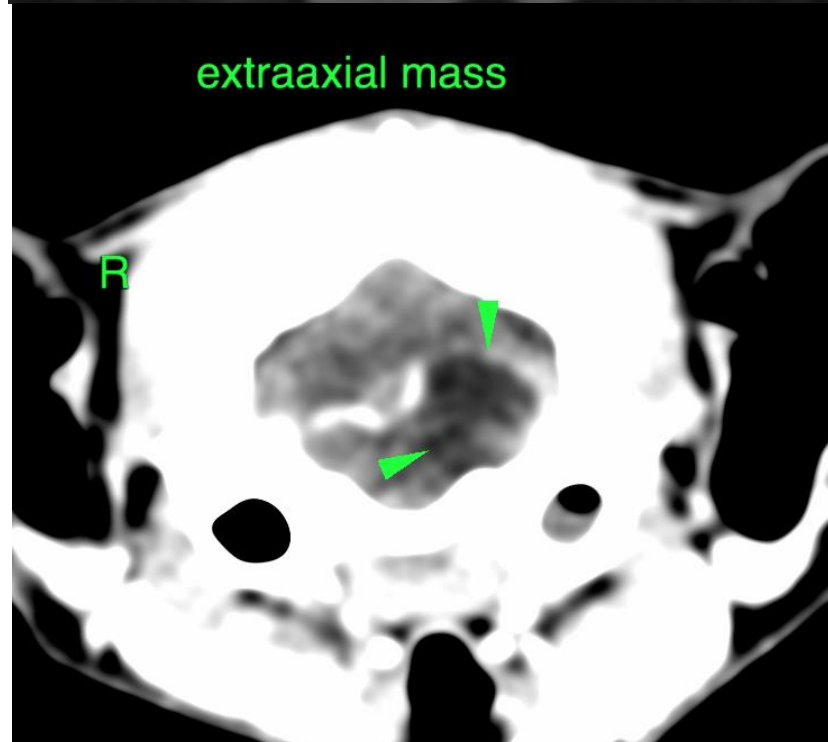
Garcia

**INVOICE**

56986

**DATE**

2-27-23





**PATIENT**

DT Van Dyne

**SPECIES**

Feline

**BREED**

DSH

**SEX**

MN

**AGE**

15 Years

**INTERPRETED BY**

Sebastian Schaub, DVM  
Dr. med. vet. DipECVDI

**HOSPITAL NAME**

Green Dog Dental and  
Wellness

**REFERRING VET**

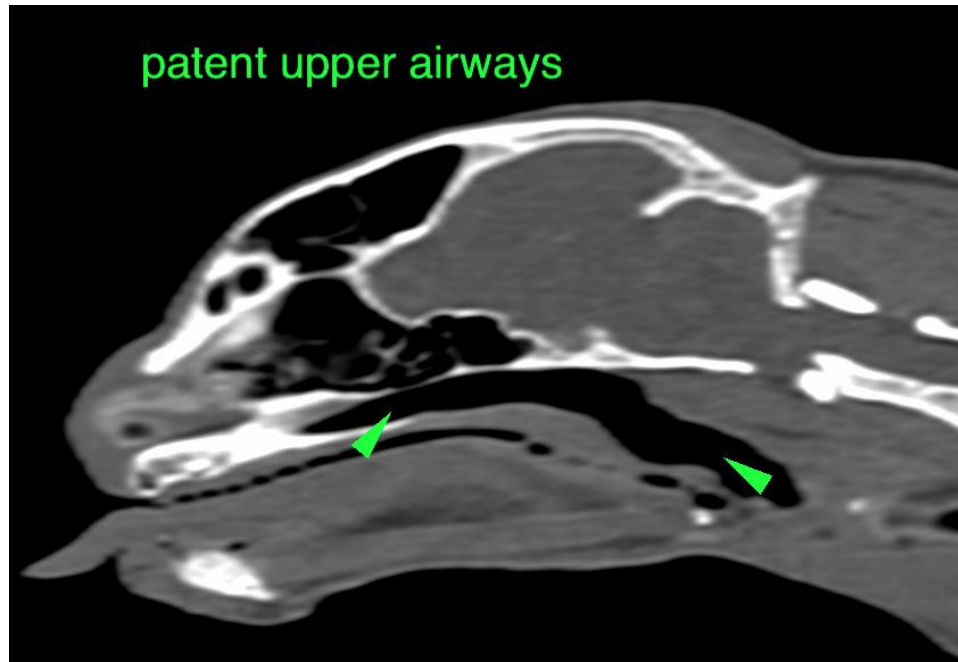
Garcia

**INVOICE**

56986

**DATE**

2-27-23



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