



PATIENT

Minnie Furness

PRESENTING CLINICAL SIGNS

Suspect neoplasia- mass bilateral ventral neck cervical area possible lymph nodes. Anisocoria OS pupil. ruleouts: Intra/extra cranial tumor causing severe facial paralysis on left side with severe muscle atrophy of skull and left mucoid nasal discharge

SPECIES

Feline

COMPUTED TOMOGRAPHY OF THE SKULL

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

BREED

DLH

COMPUTED TOMOGRAPHIC FINDINGS

The pictured parts of the dentition are complete and unremarkable in all jaw quadrants. The volume of the left temporal musculature is moderately decreased.

SEX

FS

In the left nasal cavity, non-contrast enhancing material is obliterating the spaces between the conchal & turbinate structures. The choanal region is obliterated, L>R, by soft tissue attenuating and mild contrast enhancing material. The soft tissue material is perforating the medial wall of the left orbit at the same level and is mildly protruding into the ventromedial aspect of the left orbit at the same level. A moderate mural swelling is seen level with the orifice of the auditory tube bilaterally.

AGE

12

The frontal sinuses are small and obliterated by cancellous bone – normal anatomical variant.

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.

Both tympanic bullae contain non-contrast enhancing soft tissue material. The osseous lining of the tympanic bullae is smooth and thin. The external ear canals are within normal limits.

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Imaging

Post contrast administration, a peripheral contrast enhancing tubular swelling is seen along the course of the left trigeminal nerve. The maxillary nerve is thickened, measuring up to 2.3 mm in diameter. The left round and oval foramen are moderately widened.

The medial retropharyngeal lymph nodes are markedly enlarged, uniform soft tissue attenuating and heterogeneous contrast enhancing. The mandibular lymph nodes are prominent.

REFERRING VET

Blair Hollowell, DVM

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Soft tissue mass choanal region with perforation of the left orbit and left sided upper airway obstruction and secondary rhinitis
- Segmental neuropathy left trigeminal nerve and its branches and pressure atrophy of the respective neuroforamina
- Lymphadenopathy medial retropharyngeal and mandibular lymph nodes bilaterally
- Suspect intramural swelling wall of nasopharynx
- Left sided neurogenic muscle atrophy left temporal muscle
- Bilateral otitis media

INVOICE

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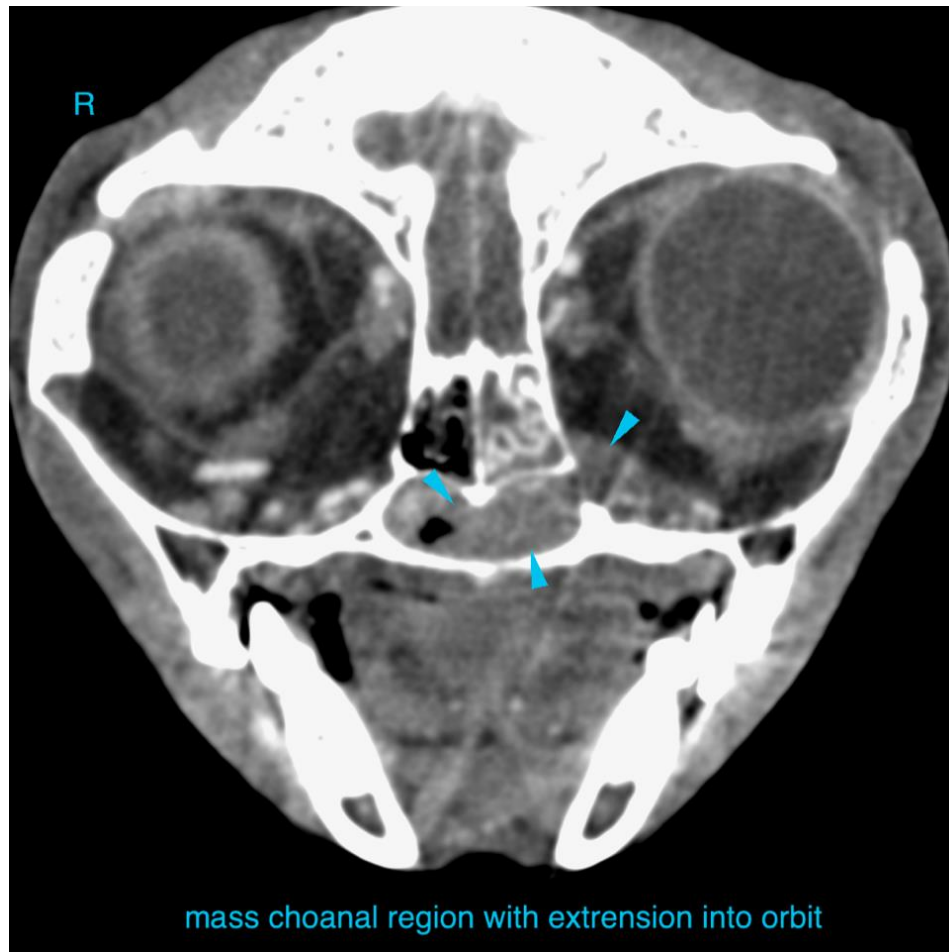
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are highly concerning for disseminated neoplastic disease, with a mass in the choanal region, neuropathy of the left trigeminal nerve and significant lymphadenopathy of the regional lymph nodes of the skull. Underlying round cell tumor is considered as the top differential. If not done so yet, recommend FNA sampling of the enlarged lymph nodes for further definition.



mass choanal region with extension into orbit



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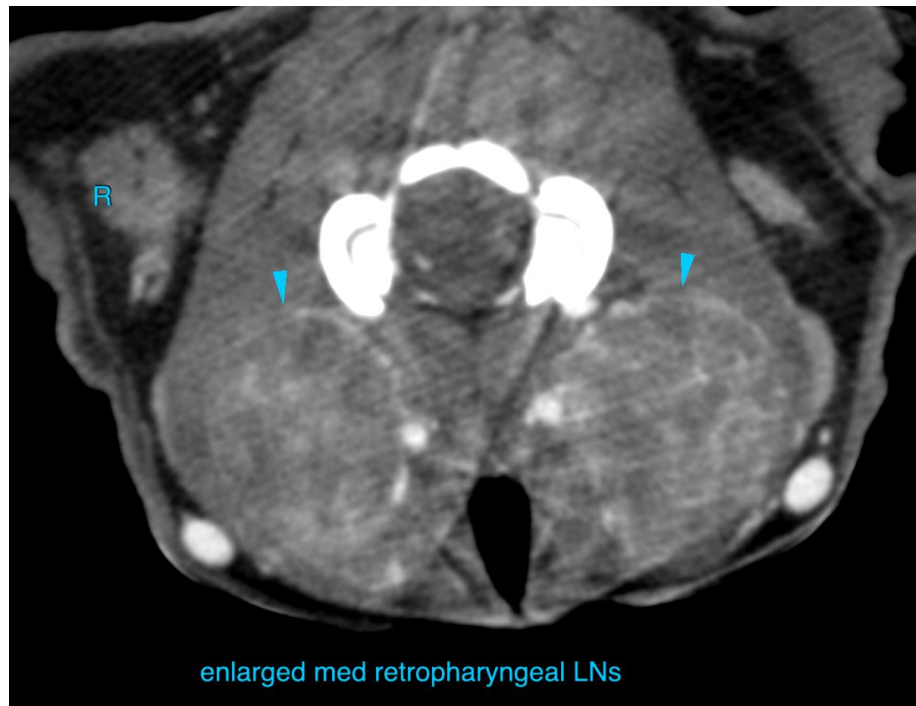
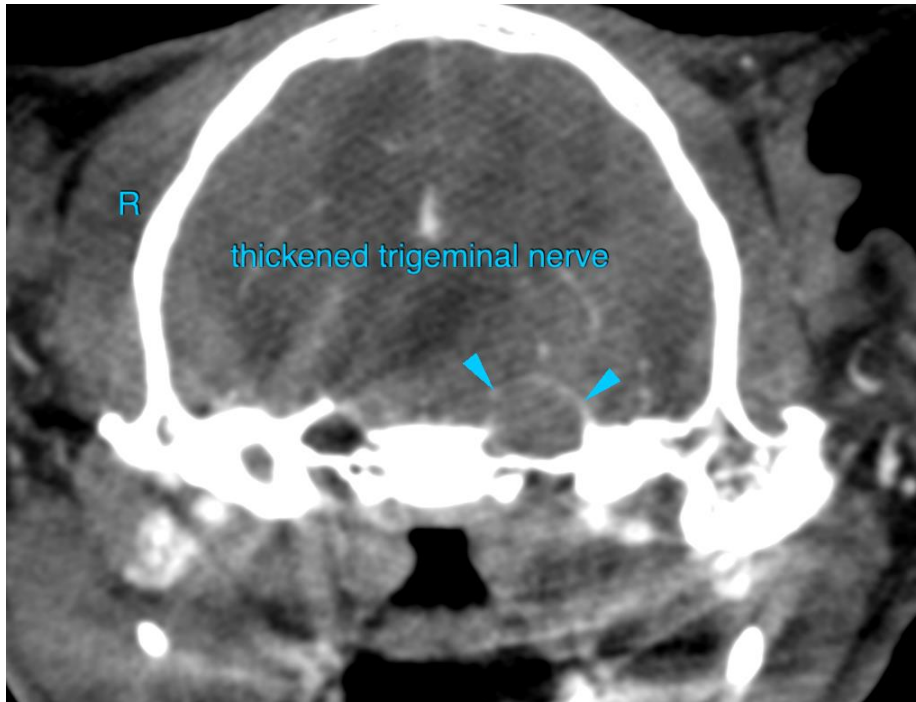
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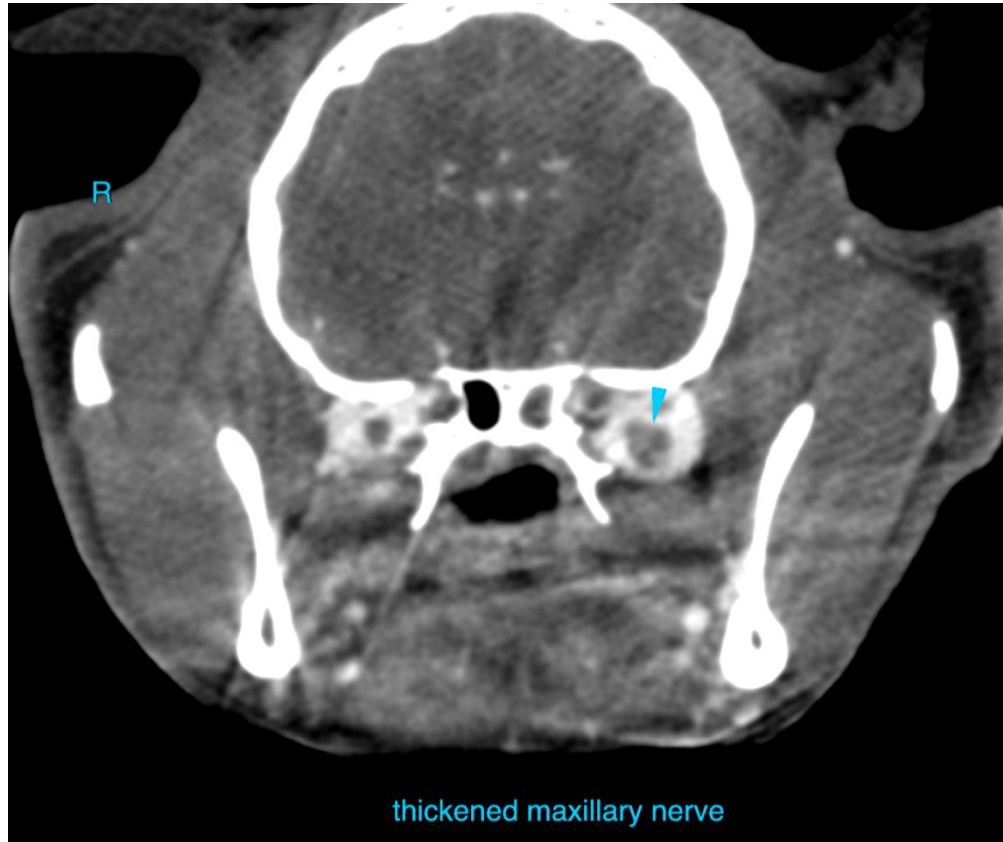
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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