



PATIENT

Luna Gierz

SPECIES

Feline

BREED

Ragdoll

SEX

Female

AGE

6M

WEIGHT

6lbs

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet.
DipECVDI

IMAGING PERFORMED BY

Sidney

HOSPITAL NAME

East Hill Animal
Hospital

REFERRING VET

Laura Hall

INVOICE

74336

DATE

3-24-26

PRESENTING CLINICAL SIGNS

- Spayed today
- chronic URI and nasal breathing since January 2026
- Increase lung opacity on radiographs January 2026 treated with Kenalog and Amoxi drops
- Persisten stertor and snorting nouse
- Lungs Clear February switched to Doxycycline
- CBC, Chem 10, T4, FIV/ FELV/ HW test and Fever of Unknown Origin panel- WNL

COMPUTED TOMOGRAPHY OF THE SKULL

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

COMPUTED TOMOGRAPHIC FINDINGS

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

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining. The left frontal sinus is absent.

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

The right tympanic bulla is filled with soft tissue attenuating material with an ill-defined zone with diffuse contrast uptake – the tympanic part of the right temporal bone is perforated at the same level and localized contrast uptake level with the meninges is appreciated. The osseous wall of the right tympanic bulla is thickened and mildly rough. The osseous segment of the right Eustachian tube is dilated. Contrast enhancing material is protruding from the orifice of the right Eustachian tube into the nasopharynx that is completely obliterated. In the left tympanic bulla, a small amount of gravity dependent soft tissue material is seen. The external ear canals are within normal limits.

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 medial retropharyngeal lymph nodes are prominent, R>L.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Right sided chronic otitis media with perforation of the cranial fossa and signs of localized meningitis
- Secondary nasopharyngeal inflammatory polyp formation and mechanical upper airway obstruction
- Mild left sided otitis media
- Lymphadenopathy medial retropharyngeal lymph nodes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT series reveals right sided chronic otitis media along with inflammatory polyp formation, protruding into the nasopharynx. There is evidence of localized perforation of the cranial fossa and secondary mild meningitis. The finding do explain the described clinical signs. Removal of the polyp using traction technique ± ventral bulla osteotomy may be beneficial.

Secondary reactive lymphoid hyperplasia of the regional lymph nodes of the skull.



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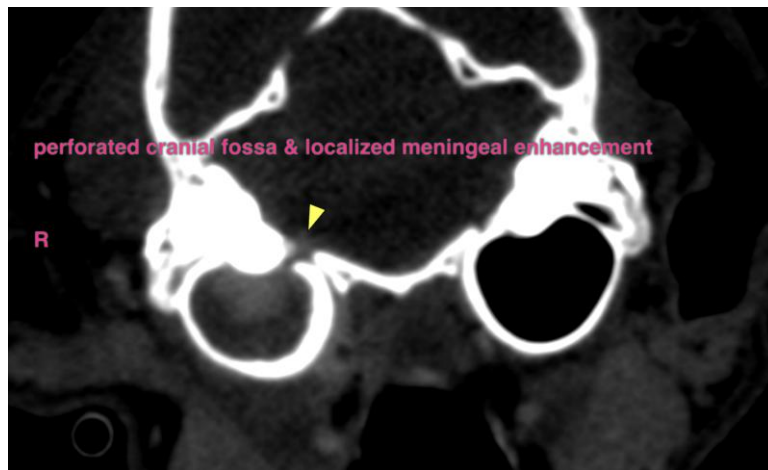
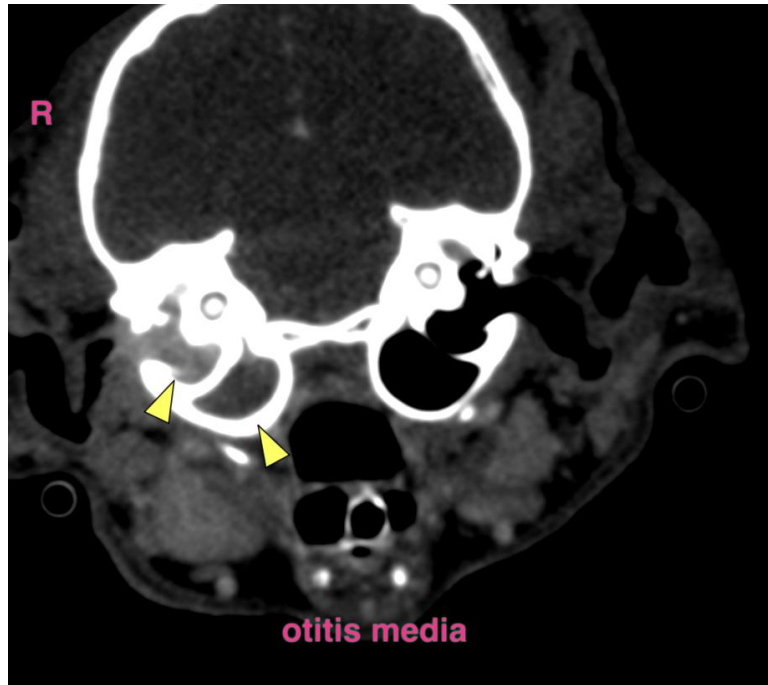
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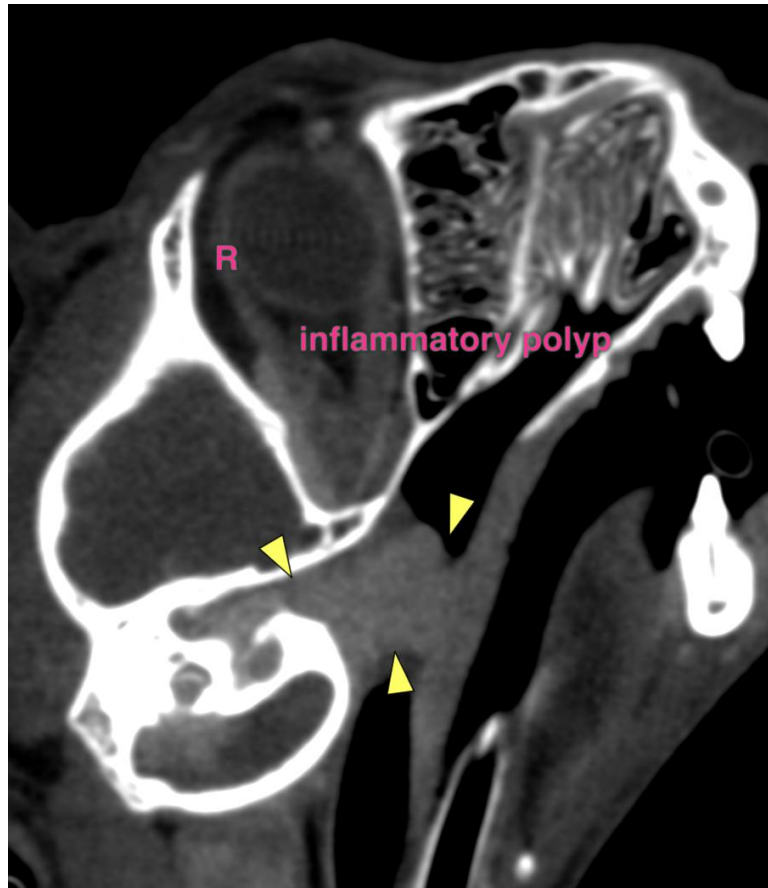
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
info@sonopath.com