



PATIENT PRESENTING CLINICAL SIGNS

Foomish Marsilli History: Presented for a chronic hx of wheezing, halitosis, suspected dental disease, trouble eating, drooling. Radiographs show a 4cm dorsal tracheal thickening/nodular mass resulting in tracheal lumen narrowing. The tracheal lumen on Bronchoscopy prior to CT(intubated) showed a focal narrowing with bleeding/purulent discharge. Obtained culture and cytology. No obvious masses noted.

SPECIES

Feline

Abnormal PE/Chem/CBC/UA Results: Glob 5.9 Otherwise normal

BREED COMPUTED TOMOGRAPHIC STUDY OF THE SKULL, THORAX AND ABDOMEN

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

SEX COMPUTED TOMOGRAPHIC FINDINGS

Neutered Male

Skull

AGE

12 Years

Multiple teeth are absent. The remaining teeth present evidence of moderate periodontal disease and evidence of multiple resorptive dental lesions.

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

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.

HOSPITAL NAME

Northeast VRH

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.

REFERRING VET

Dr. Runde

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.

Thorax

INVOICE

14464

In the subcutaneous tissue in the left axillary region a well-defined soft tissue nodule, measuring up to 8 mm in size is seen.

DATE

3/30/22



PATIENT	The caudal two thirds of the trachea – up to the carina – presents an irregular shaped with irregular narrowing of the lumen. The respective segment – most accentuated in the middle third, level with the cranial thoracic aperture – presents a prominent tracheal wall with moderate contrast enhancement.
Foomish Marsilli	
SPECIES	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.
Feline	
	The cardiovascular structures including the pulmonary vasculature are within normal limits.
BREED	The bronchial walls are generalized mildly thickened.
Somali	
	The lung parenchyma presents the expected architecture and attenuation behavior.
SEX	Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.
Neutered Male	
	Abdomen
AGE	Most accentuated the cranial abdomen presents with mild to moderate motion artefacts.
12 Years	
	The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.
INTERPRETED BY	Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.
Sebastian Schaub, DVM Dr. med. vet. DipECVDI	
	The adrenal glands are within normal limits for size, shape and organ architecture.
HOSPITAL NAME	Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.
Northeast VRH	
	The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.
REFERRING VET	The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.
Dr. Runde	
	The bony and surrounding soft tissue structures reveal no abnormalities.
INVOICE	COMPUTED TOMOGRAPHIC DIAGNOSIS
14464	<ul style="list-style-type: none"> • Irregular tracheal narrowing with mild mural thickening of the tracheal wall • Mild bronchial lung pattern • Generalized periodontal disease and dental resorptive lesions
DATE	
3/30/22	



PATIENT • Multiple absent teeth

Foomish Marsilli

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

Feline

The findings are fitting the history of irregular tracheal collapse – rule tracheal collapse secondary to inflammatory lower airway disease, tracheal stricture secondary to chronic inflammation/irritation or preceding traumatic insult; iatrogenic causes such as preceding endotracheal intubation with overinflated cuff might be a consideration as well. There is no evidence of a distinct mass and the findings are atypical for neoplastic invasion of the tracheal wall. Tracheoscopy including sampling from the tracheal wall has already been performed for further evaluation. The chances of tracheal stenting should be discussed with internal medicine.

BREED

Somali

The mild bronchial pattern indicates inflammatory lower airway disease – might be secondary to tracheal obstruction.

SEX

Neutered Male

AGE

12 Years

INTERPRETED BY

Sebastian Schaub, DVM Dr. med. vet. DipECVDI



HOSPITAL NAME

Northeast VRH

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.

REFERRING VET

Dr. Runde

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
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PATIENT

Foomish Marsilli

SPECIES

Feline

BREED

Somali

SEX

Neutered Male

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