



PATIENT PRESENTING CLINICAL SIGNS

Lilly Borck Owner reports that Pt has been treated for chronic URIs since august. URIs keep coming back despite treatment by rDVM. Pt got a Depo injection in February, but Owner reports no relief. Pt coughs approximately twice daily and has a nasal congestion sound to purr and breathing. e/d okay no v/d. eats well, but weightloss has been noted.

SPECIES

Feline **COMPUTED TOMOGRAPHY OF THE SKULL & THORAX**

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

BREED

DMH **COMPUTED TOMOGRAPHIC FINDINGS**

Skull

The tooth elements 101, 106, 201, 206, 301, 307 and 407 are absent.

SEX

Spayed Female

The nasal cavity presents the expected aerated spaces between thin & even conchae and turbinates with smooth mucosal lining but a small zone of consolidation of the right conchal structures. The larynx present a significant diffuse mural, L>>R, soft tissue swelling with a heterogeneous contrast enhancement pattern.

AGE

14 Years

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

INTERPRETED BY

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.

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

HOSPITAL NAME

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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

The bony and surrounding soft tissue structures are within normal limits.

REFERRING VET

Dr. Smith

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation pattern is uniform and considered within normal limits.

The cardiovascular structures including the pulmonary vasculature are within normal limits.

INVOICE

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The bronchial walls are mildly thickened.

The left cranial lung lobe is consolidated, the volume is significantly decreased and air-bronchograms are visible; a mediastinal shift to the left is appreciated. The ventral dependent tip of the right middle and the accessory lung lobe present small zones with consolidation of the lung parenchyma. The remainder of the lung parenchyma present the expected architecture and attenuation behavior.

DATE

3-30-23

Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.



PATIENT **COMPUTED TOMOGRAPHIC DIAGNOSIS**

Lilly Borck

- Intramural laryngeal mass, L>>R
- Mild rhinitis
- Mild bronchial pattern
- Atelectasis left cranial lung lobe
- Small zones of dystelectasis ventral dependent aspects of the lung
- Multiple absent teeth

SPECIES

Feline

BREED

DMH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The main finding is a laryngeal intramural mass, highly suggestive for neoplastic infiltration (e.g. squamous cell carcinoma, lymphosarcoma), theoretically laryngeal granuloma (e.g. eosinophilic) is a differential. Recommend cyto-brush/FNA sampling of the laryngeal mass for further workup.

SEX

Spayed Female

The atelectatic left cranial lung lobe is likely a sequela to preceding or ongoing bronchitis – commonly primary allergic – and mucus plugging with secondary resorption atelectasis.

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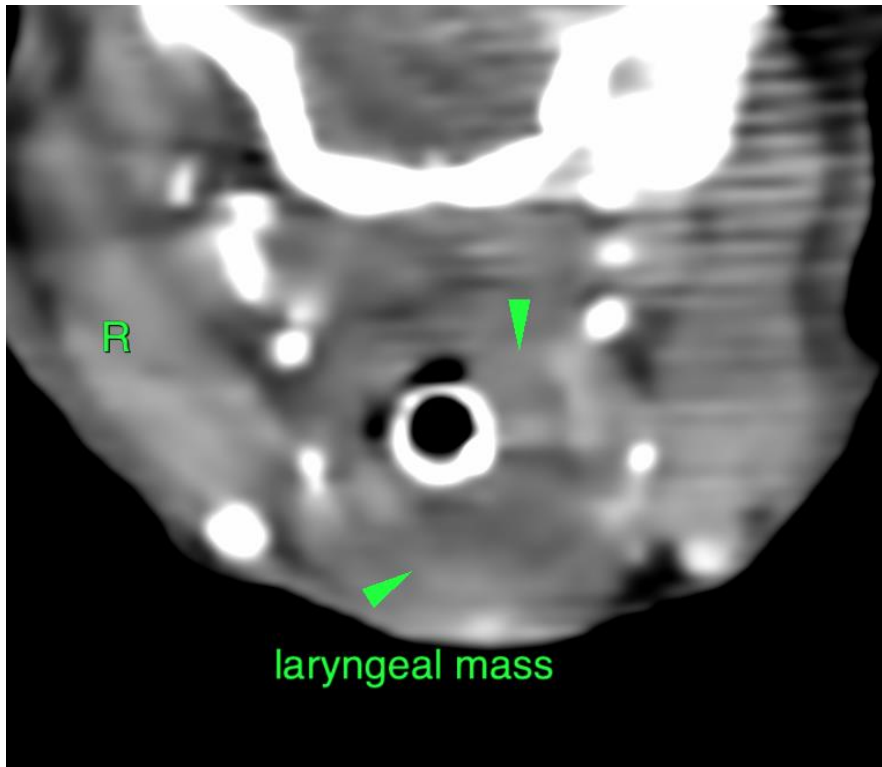
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PATIENT

Lilly Borck

SPECIES

Feline

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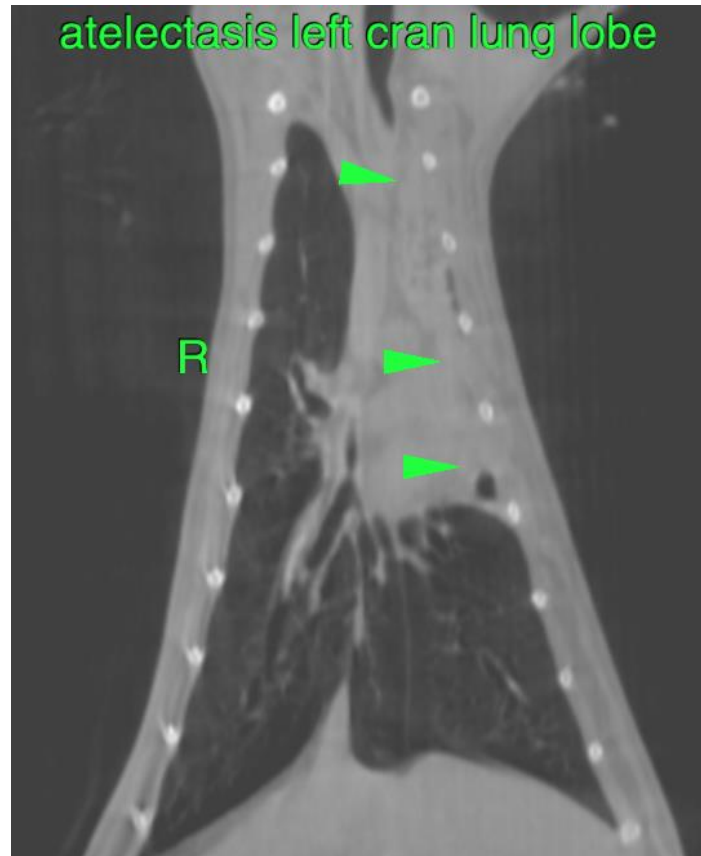
Spayed Female

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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.

REFERRING VET

Dr. Smith

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INVOICE

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