



PATIENT

Socket Kendall

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

11 Years 1 Day

WEIGHT

12 Pounds

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

IMAGING PERFORMED BY

Joseph D'Abbraccio,
DVM

HOSPITAL NAME

Catskill VS, PLLC

REFERRING VET

Daniela Carbone, DVM

INVOICE

36135

DATE

3/6/26

PRESENTING CLINICAL SIGNS

- Owner reports Socket is an outdoor cat and suspects he was kicked by a neighbor acting erratically, resulting in a jaw injury noticed on Saturday. Owner initially thought it was a dental issue and made an appointment with regular veterinarian; Socket previously had a tooth removed under anesthesia two to three years ago at All Animal in Modena. Owner reports no coughing, sneezing, vomiting, or diarrhea. The socket is currently eating small amounts of veterinary wet food, licking the juice, and not eating dry food; water intake is unknown due to outdoor activity. No medications currently given; not up to date on vaccines and needs a rabies vaccination. The owner describes Socket as having high energy when placed in the carrier.
- Abnormal PE/Chem/CBC/UA Results: PE: Oral Cavity: Possible jaw subluxation or fracture; further evaluation under anesthesia planned to determine presence of luxation or mandibular/maxillary fracture. No detailed intraoral findings documented on physical exam. Chem: Globulin 5.5; CBC: RBC 5.85; Hematocrit 24.4; Hemoglobin 7.9; Eosinophils 0.08; Feline proBNP <50;

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL

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

COMPUTED TOMOGRAPHIC FINDINGS

Triadan 104, 109, 208, 209 are absent. Triadan 107 presents resorptive lesions. Ankylosis and advanced root resorption of triadan 207 is appreciated – the crown is separated from the roots.

The mandibular symphysis is mildly widened rostrally.

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

The condylar process of the right mandible is incompletely separate from the ramus by a transverse fracture line.

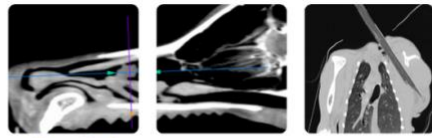
Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. In the medial aspect of the left external ear canal, a small amount of soft tissue material is appreciated.

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation pattern is uniform.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Acute traumatic incomplete fracture base of condylar process right mandible
- Widened mandibular symphysis
- Dental resorptive lesions 107 and 207 – with secondary separation of the crown
- Multiple absent teeth

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS



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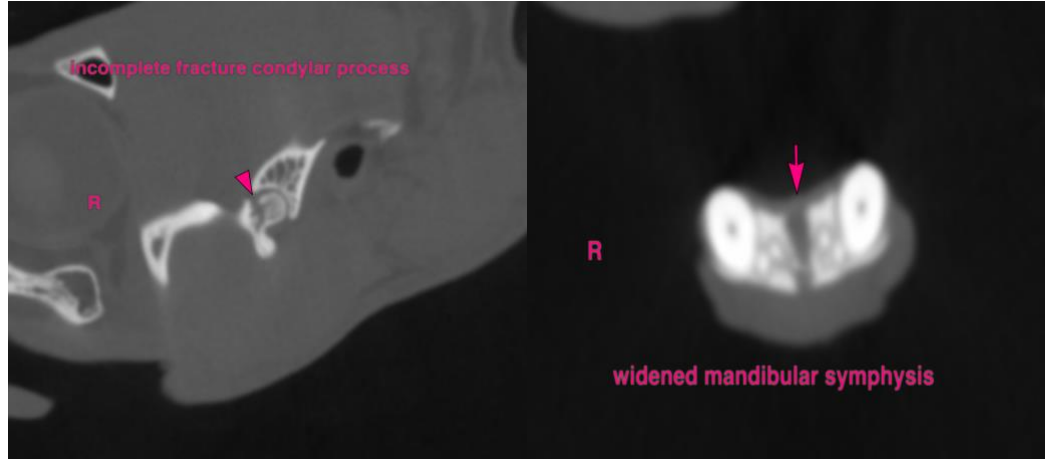
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The fractured condylar process of the right mandible is fitting the history of blunt trauma to the head. The widened mandibular symphysis is indicative for (incomplete) mandibular symphysis fracture – check clinically for instability of the symphysis.



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, DVM, Dr. med. vet. DipECVDI
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