



**PATIENT PRESENTING CLINICAL SIGNS**

**Bizkit Morrison**  
 Nasal/respiratory symptoms started in February 2022 and improved after one course of antibiotics but symptoms returned  
 Abnormal PE/Chem/CBC/UA Results: Mild anemia HCT 28.9%, Leukocytosis 25,000 with neutrophilia 20,000 and monocytosis 680; mild hyperglobulinemia 5.6

**SPECIES**

Feline

**COMPUTED TOMOGRAPHY OF THE SKULL**

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

**BREED**

DSH

**COMPUTED TOMOGRAPHIC FINDINGS**

The tooth elements 106, 307 and 407 are absent.

**SEX**

FS

The right nasal cavity is occupied by a soft tissue attenuating and heterogeneous contrast enhancing expansile mass. Advanced destruction of the associated conchal & turbinate structures of the right nasal cavities is seen, as well as extensive aggressive osteolytic lesions of the right maxilla and palatine bone. The nasal mass is protruding into the subcutaneous tissue along the lateral and dorsal aspect of the nose and into the right orbit.

**AGE**

16 Years

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.

**INTERPRETED BY**

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.

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.

**HOSPITAL NAME**

Petroglyph Animal Hospital

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Biologically aggressive nasal soft tissue neoplasia originating from the right nasal cavity
- Secondary polyostotic aggressive osteolytic lesions right maxillary and palatine bone
- Multiple absent teeth

**REFERRING VET**

Alice Ku

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The CT study is consistent with primary nasal neoplasia, originating from the right nasal cavity. Differentials include adenocarcinoma, squamous cell carcinoma, lymphosarcoma, other. FNA sampling of the subcutaneous swelling along the right lateral aspect of the nose ± rhinoscopy with biopsy can be used as advanced diagnostic tests. Based on the results of the advanced diagnostic tests, the chances of radiation therapy can be discussed with oncologist.

**INVOICE**

51697

**DATE**

4-22-22

Consider full tumor staging.



**PATIENT**

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Hospital

**REFERRING VET**

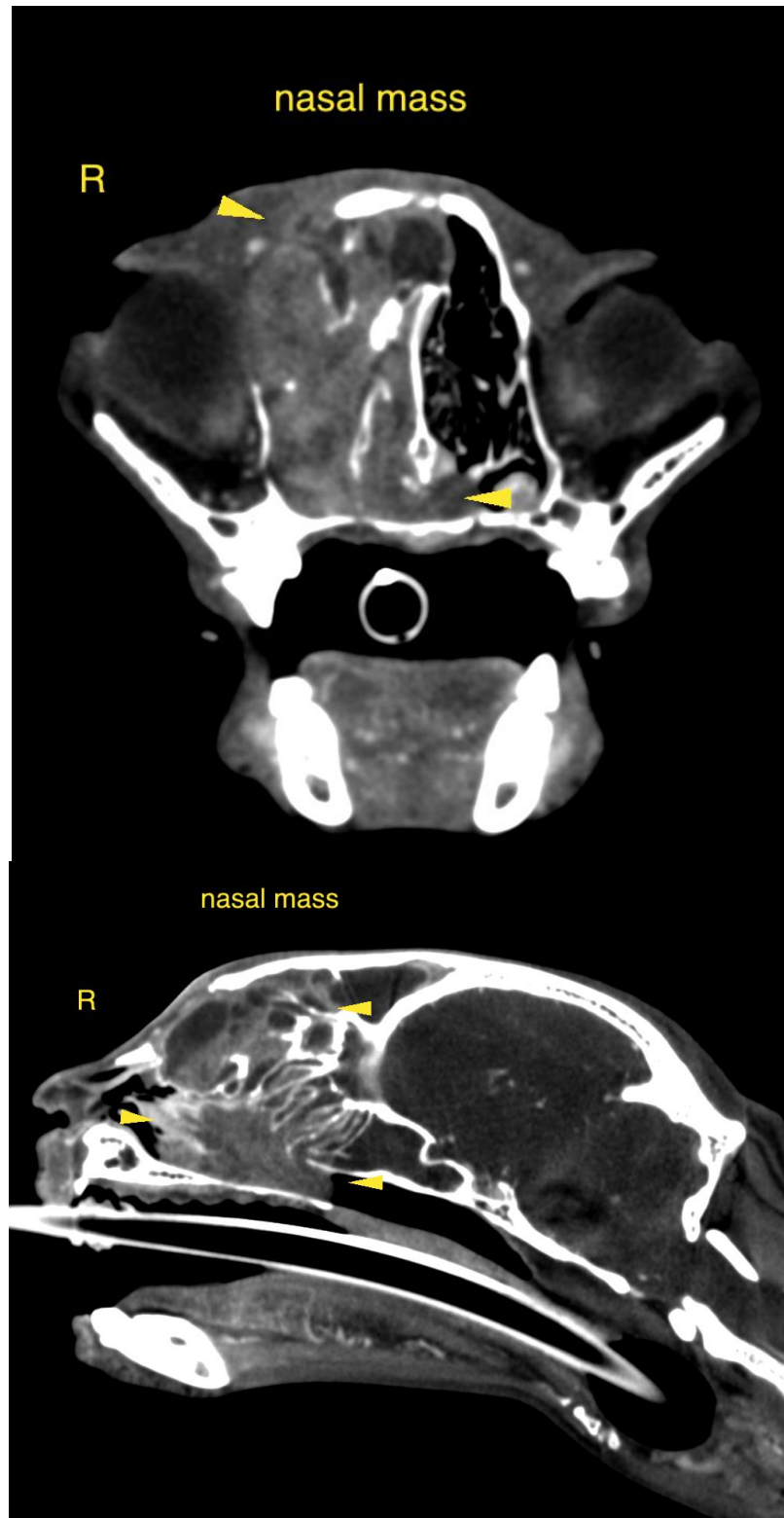
Alice Ku

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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.

**BREED**

DSH

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.

**SEX**

FS

**Sebastian Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
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**AGE**

16 Years

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