



PATIENT

Cricket McLauchlan

PRESENTING CLINICAL SIGNS

Chronic nasal congestion since adopted 18 months ago, also chronic right otitis. Suspect nasopharyngeal polyp with right middle ear extension.
Abnormal PE/Chem/CBC/UA Results: Increased WBC 21.72x19⁹/L, glucose 11.11 mmol/L, glob 57 g/L

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 101-103, 106, 201-203, 301, 302, 309 and 401-403 are absent.

SEX

FS

The nasal cavity is occupied by fluid attenuating material. Post contrast administration, the nasal mucosal lining is moderately thickened and moderate destruction of the nasal conchal & turbinate structures is appreciated. The frontal sinuses are filled with fluid attenuating material and moderate hyperostosis of the osseous lining of the frontal sinuses is appreciated.

AGE

2 Years

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

Both tympanic bullae are occupied by soft tissue attenuating material and the osseous lining of both tympanic bullae is irregularly thickened. Mild contrast enhancing material is bulging into the medial aspect of the right external ear canal.

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 prominent and present a mild heterogeneous contrast enhancement pattern.

HOSPITAL NAME

Bridgwater
Veterinary Hospital
and Wellness Centre

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Chronic destructive rhinitis and sinusitis with hyperostosis of the osseous lining
- Bilateral chronic otitis media, R>L
- Right sided otitis externa
- Lymphadenopathy mandibular and medial retropharyngeal lymph nodes bilaterally

REFERRING VET

Dr. Standish

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are consistent with chronic destructive rhinitis and chronic sinusitis with hyperostosis. The causative agent is most likely primary viral with bacterial superinfection. Even though unlikely there is a small chance of emerging fungal (cryptococcal) superinfection.

INVOICE

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Rhinocopy with biopsy and samples for microbial cultures can be used as advanced diagnostic tools. In cases of chronic rhinosinusitis, clinical signs are likely to reoccur.

DATE

5-4-22

The chronic otitis media is considered as a sequela to the upper respiratory tract infection with ascending infection by the Eustachian tube. As there is potential contrast enhancing material bulging into the right external ear canal, inflammatory polyp is a potential – otoscopy is recommended to rule in/out inflammatory polyp.



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The prominent mandibular and medial retropharyngeal lymph nodes are consistent with secondary reactive lymphadenitis due to the underlying chronic rhinitis.

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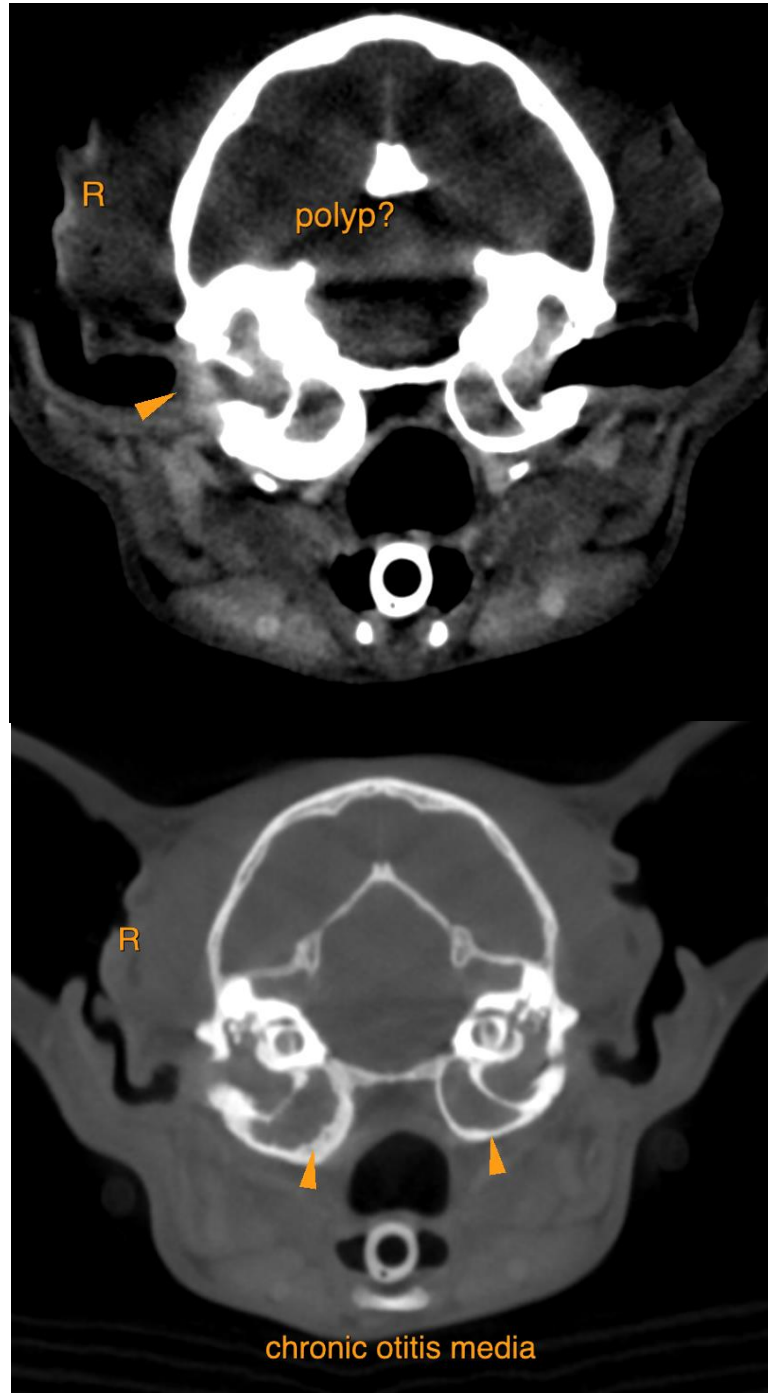
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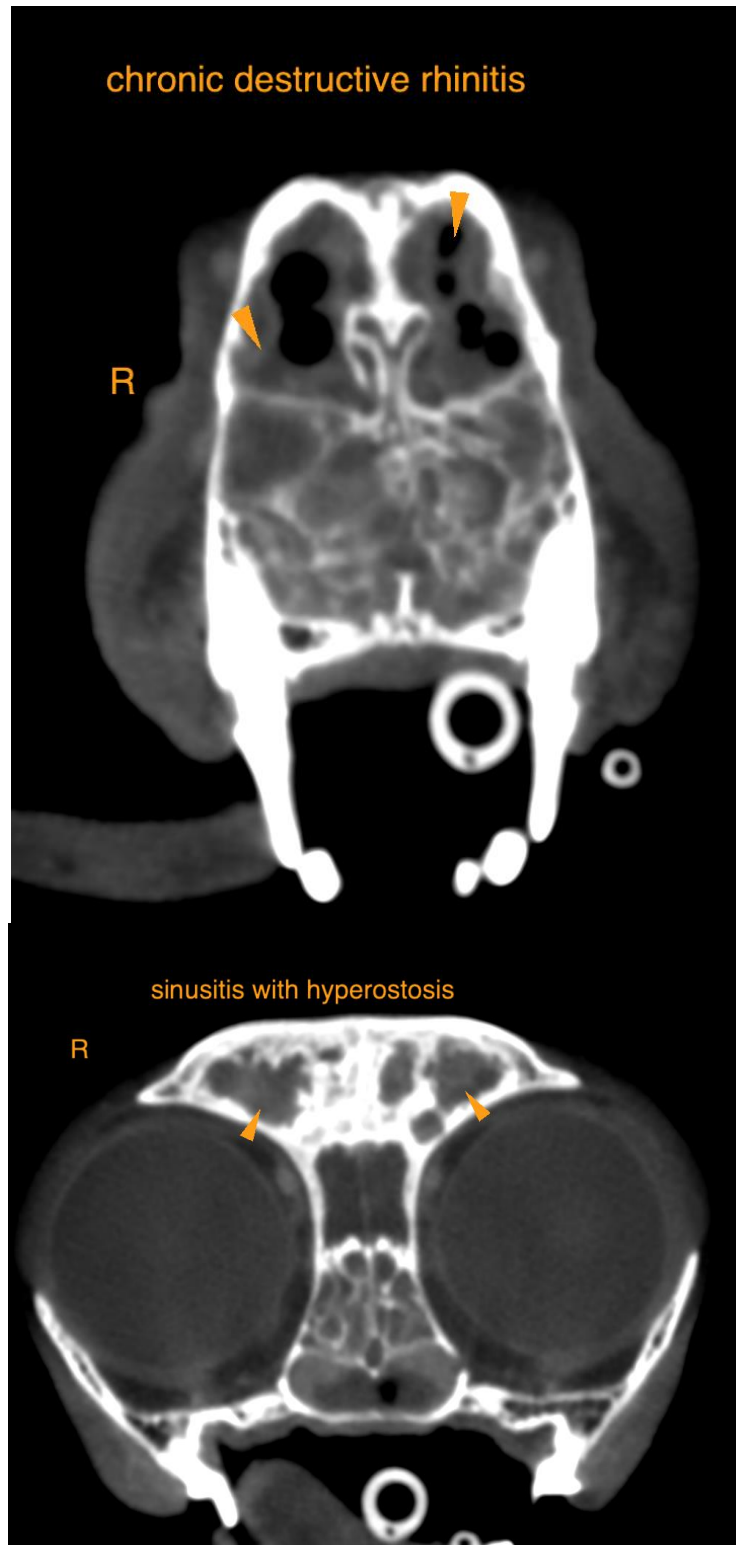
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

BREED

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