



PATIENT

Nina Bravo

PRESENTING CLINICAL SIGNS

Facial swelling for past month, Congested, Dorsal nasal swelling, pet on marbofloxacin 25mg 1/4 tab po sid last given last night
Abnormal PE/Chem/CBC/UA Results: low platelets 34 range (151-600)

SPECIES

Feline

COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

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

BREED

DSH

COMPUTED TOMOGRAPHIC FINDINGS

Skull

The left nasal cavity is occupied by a soft tissue attenuating expansile mass with multifocal amorphous mineralization. Extensive destruction of the associated conchal & turbinate structures is seen. The left maxillary and left palatine bone present advanced aggressive osteolytic lesions and the soft tissue mass is perforating into the subcutaneous tissue along the left aspect of the nose and the left orbit. Extensive lysis of the alveolar process of the left alveolar bone and the left zygomatic arch is seen. In the caudal aspect the nasal mass is extending up into the choana, obliterating the lumen.

AGE

14 Years

Triadan 309 presents a moderate widening of the periodontal space.

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

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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.

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.

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Thorax

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

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.

REFERRING VET

Dr. Jennifer Short

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

Generalized mild thickening of the bronchial walls is appreciated.

INVOICE

52019

The lung parenchyma presents the expected architecture and attenuation behavior.

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

COMPUTED TOMOGRAPHIC DIAGNOSIS

DATE

5-9-22

- Biologically aggressive soft tissue neoplasia originating from the left nasal cavity with polyostotic aggressive osteolytic lesions of the associated osseous structures and the mass extending into the subcutaneous tissue
- Periodontal disease 309



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- Mild bronchial pattern
- No evidence of pulmonary metastatic disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

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The findings are consistent with a biologically aggressive soft tissue neoplasm, originating from the left nasal cavity and secondary polyostotic aggressive osteolytic lesions of the surrounding osseous structures. Differentials include adenocarcinoma, squamous cell carcinoma, transitional cell carcinoma, lymphosarcoma, other. FNA sampling of the subcutaneous swelling or rhinoscopy with biopsy can be used as advanced diagnostic tests. Based on the results of the advanced diagnostic tests, the chances of palliative radiation therapy can be discussed with oncologist. The prognosis is considered very guarded.

BREED

DSH

The bronchial pattern indicates feline bronchial disease - likely incidental due to the lack of respective clinical signs.

SEX

Female

AGE

14 Years

INTERPRETED BY

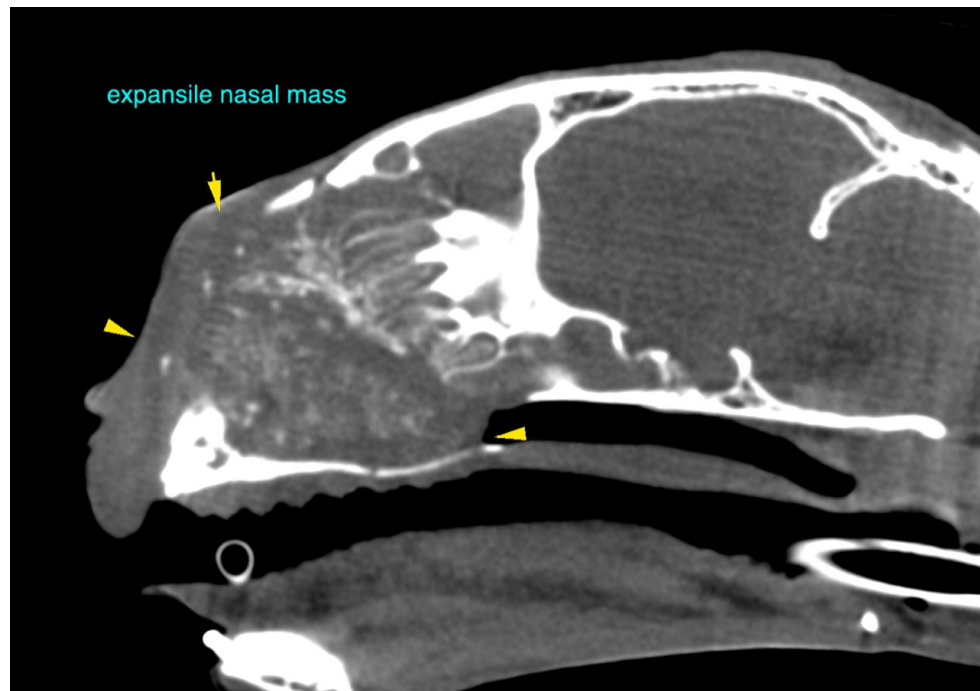
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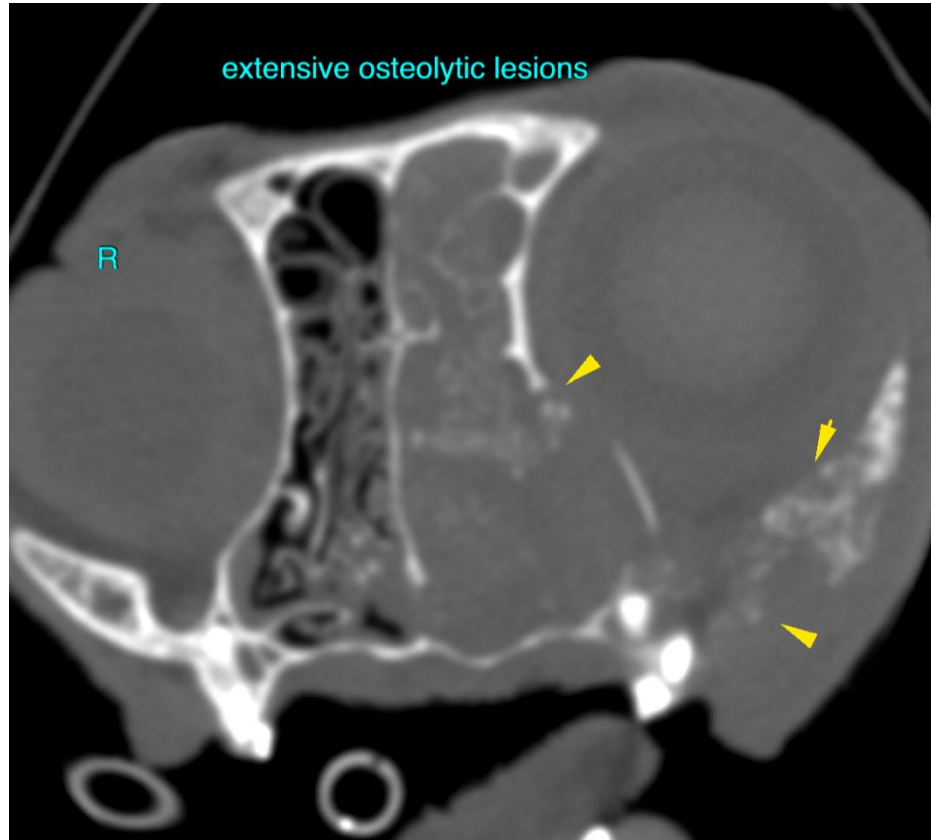
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Schaub, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI
sebast.schaub@gmail.com

INVOICE

52019

DATE

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