



**PATIENT PRESENTING CLINICAL SIGNS**

Ozzie Miller P presented for CT prior to TECA on L ear. Mass in the L ear was biopsied and came back as ceruminous carcinoma. P had TECA procedure done on the right ear at another clinic 3/27/19. Dental procedure done 6/2/22 with extractions (107, 309, 408 and 409) at primary veteriniarian. According to history extractions site were healed at recheck 2 weeks post procedure. Now there is significant inflammation on the caudal aspect of the lower arcades. P is tender on palpation of the mouth.  
 Abnormal PE/Chem/CBC/UA Results: Chemistry: BUN was low 14mg/dL, elevated GLOB 7.2 g/dL and TP 9.7g/dL CBC: WBC elevated 20.35

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

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

**COMPUTED TOMOGRAPHIC FINDINGS**

**SEX Skull**

MN The tooth elements 106, 107, 206, 309 and 407-410 are absent. The tip of the crown of triadan 204 is absent, exposing the widened pulp cavity to the dental surface. Advanced resorption of the root of triadan 204 is present.

**AGE** Mild atrophy of the nasal conchal structures is seen. In the dorsal aspect of the left nasal cavity, a small amount of trapped fluid attenuating material is present.

9 Years, 11 Months

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

Sebastian Schaub, DVM  
 Dr. med. vet. DipECVDI

The right external ear canal is absent. Major parts of the lateral wall of the right tympanic bulla are absent and a small amount of fluid attenuating material is seen in the remainder of the right tympanic bulla.

**HOSPITAL NAME** The left external ear canal is obliterated by a heterogeneous contrast enhancing soft tissue mass, blending with the wall of the left external ear canal. Likely the tympanic membrane is bulging into the lumen of the left tympanic bulla. The left tympanic bulla contains a small amount of fluid attenuating material.

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**REFERRING VET** 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.

Brad Bartholomay

The submandibular and medial retropharyngeal lymph nodes are moderately enlarged, uniform soft tissue attenuating and present a heterogeneous contrast enhancement pattern.

**INVOICE Thorax**

53105

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

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

7-26-22

The cardiovascular structures including the pulmonary vasculature are within normal limits, a small punctuate mineralization is seen at the caudal aspect of the distal segment of the azygos vein.



**PATIENT**

Ozzie Miller

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

The lung parenchyma presents the expected architecture and attenuation behavior.

**SPECIES**

Feline

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

The common bile duct is dilated, measuring 4.5 mm in diameter. Generalized mild dilation of the intrahepatic biliary tree is seen. Multiple cavitory parenchymal lesions are seen throughout the hepatic parenchyma.

**BREED**

DSH

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

- Soft tissue mass left external ear canal
- Mild left sided otitis media
- History of right sided total ear canal ablation and lateral bulla osteotomy
- Lymphadenopathy mandibular and medial retropharyngeal lymph nodes bilaterally
- Mild destructive rhinitis
- Multiple absent teeth
- Generalized dilation of the biliary tree without signs of mechanical obstruction – correlate with lab work
- Suspect hepatic cysts
- No evidence of pulmonary metastatic disease

**SEX**

MN

**AGE**

9 Years, 11 Months

**INTERPRETED BY**

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Dr. med. vet. DipECVDI

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The mass obliterating the left external ear canal is fitting the history of ceruminous gland adenocarcinoma, the therapy of choice is left sided total ear canal ablation.

**HOSPITAL NAME**

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The odds for reactive hyperplasia of the mandibular and medial retropharyngeal lymph nodes for reactive hyperplasia and metastatic spread are considered equal; recommend FNA sampling for further differentiation.

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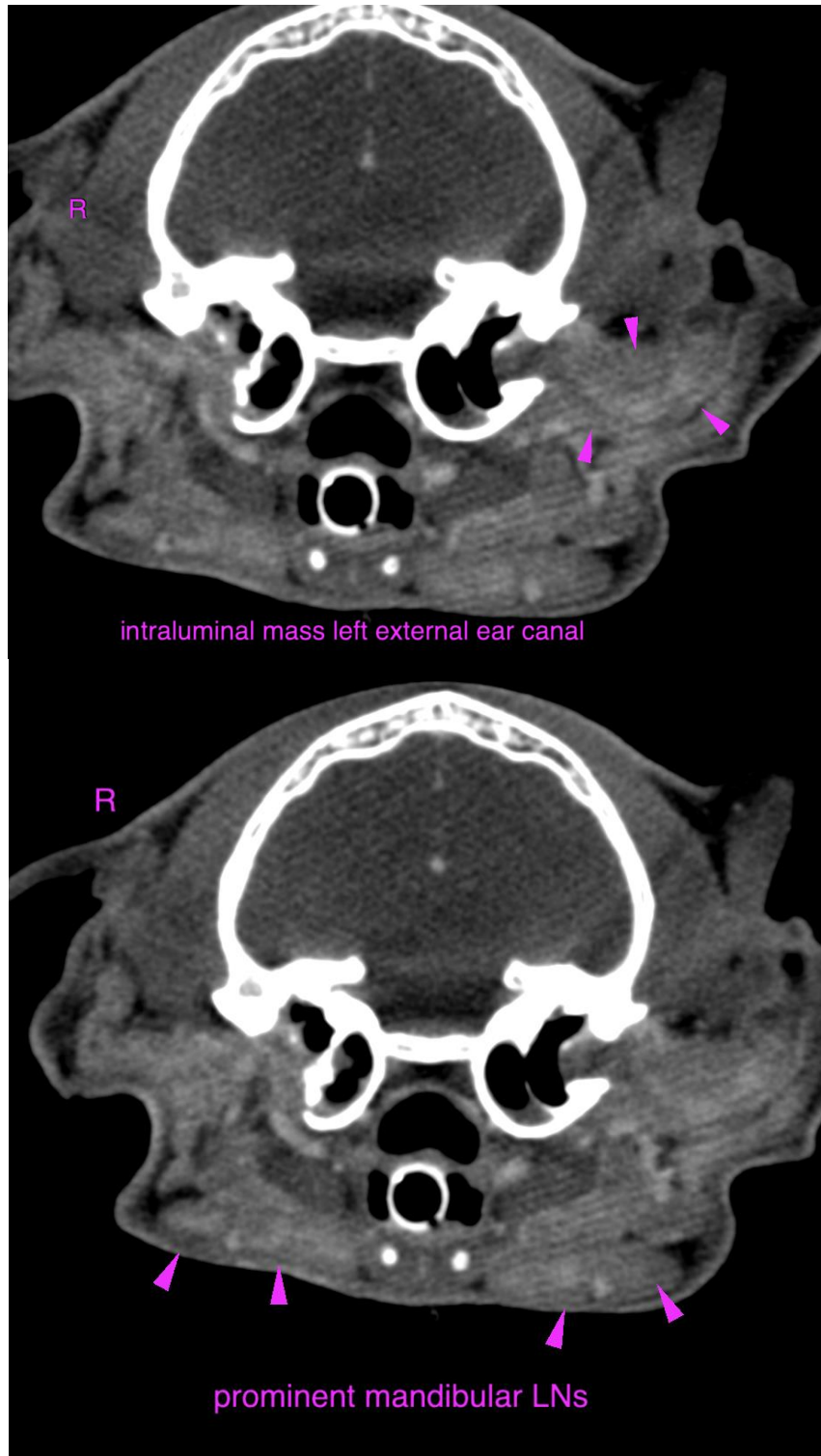
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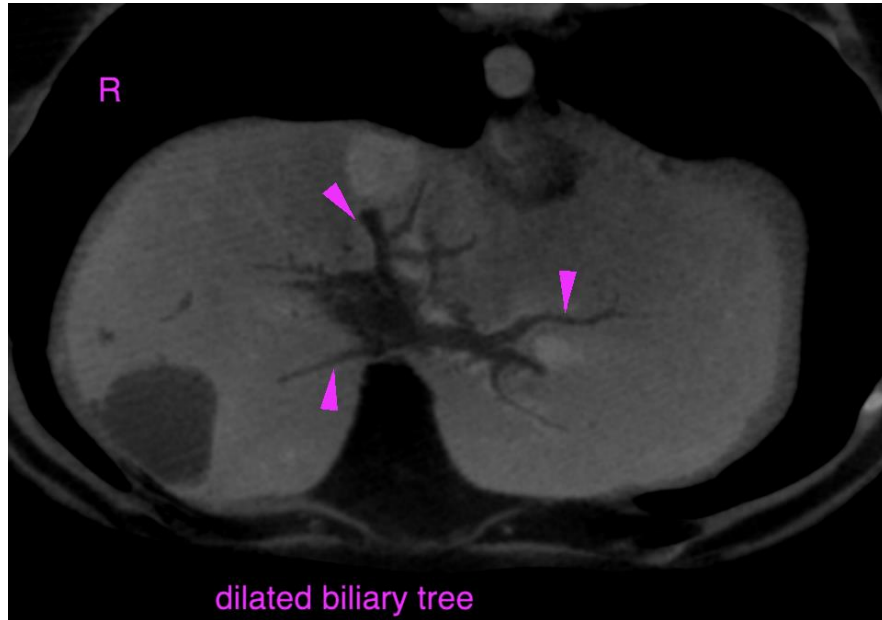
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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