



**PATIENT PRESENTING CLINICAL SIGNS**

Mitzi Schulte Pet was referred for evaluation of upper airway congestion, hyporexia, sneezing and L sided nasal discharge of several months duration. Symptoms were non or only partially responsive to various medications. At the time of the CT, a biopsy was taken from abnormal tissue (polyp vs mass) in the oropharynx and C/S of L nasal discharge was submitted  
**SPECIES** Abnormal PE/Chem/CBC/UA Results: Chem 17, CBC, Lytes all WNL

Feline

**COMPUTED TOMOGRAPHY OF THE SKULL**

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

**BREED**

**COMPUTED TOMOGRAPHIC FINDINGS**

DLH

The tooth elements 307 & 407 are absent.

**SEX**

In the left nasal cavity, advanced destruction of the conchal & turbinate structures is appreciated. Post contrast administration, the nasal mucosal lining of the left nasal cavity is moderately thickened, and a small amount of fluid attenuating material is attached to the surface. The nasal septum presents a mild right sided deviation. The osseous lining of the left nasal cavity is moderately thickened and generalized mild asymmetry of the viscerocranium is appreciated. The nasopharynx, approximately level with the opening of the Eustachian tubes, is obliterated by a rounded, uniform soft tissue attenuating and homogeneous contrast enhancing mass – occupying approximately 95% of the cross-sectional area of the nasopharynx at the same level.

FS

**AGE**

9 Years

**INTERPRETED BY**

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. No abnormalities of the Eustachian tube bilaterally are appreciated. The external ear canals are within normal limits.

Sebastian Schaub, DVM  
 Dr. med. vet. DipECVDI

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

**HOSPITAL NAME**

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.

Wilson Veterinary Hospital

The left mandibular lymph nodes and the left medial retropharyngeal lymph node are prominent.

**REFERRING VET**

**COMPUTED TOMOGRAPHIC DIAGNOSIS**

Dr. Nicholas Vitale

- Nasopharyngeal soft tissue mass with upper airway obstruction
- Left sided destructive rhinitis and hyperostosis of the osseous lining
- Lymphadenopathy left mandibular lymph nodes and left medial retropharyngeal lymph node
- Absent triadan 307&407

**INVOICE**

52694

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**DATE**

7-5-22

There is a nasopharyngeal soft tissue mass, causing upper airway obstruction. Due to the homogeneous contrast enhancement pattern and the lack of evidence of overt dilation of one of the Eustachian tubes the odds for primary nasopharyngeal neoplasia (e.g. round cell tumor) or inflammatory polyp/granuloma are mildly shifted in favor for nasopharyngeal neoplasm. If not done so yet, retrograde evaluation of the nasopharynx with (excisional)biopsy is recommended.

The most likely underlying cause for the destructive rhinitis is primary viral ± bacterial or less



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likely mycotic superinfection. The hyperostosis is a sequela to chronic rhinitis.

Complementing workup rhinoscopy for further evaluation with sampling for culture and histopathology to check for underlying fungal disease might be beneficial as well.

**SPECIES**

Feline

Secondary reactive hyperplasia of the tributary lymph nodes, FNA sampling can be used to confirm the diagnosis.

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**REFERRING VET**

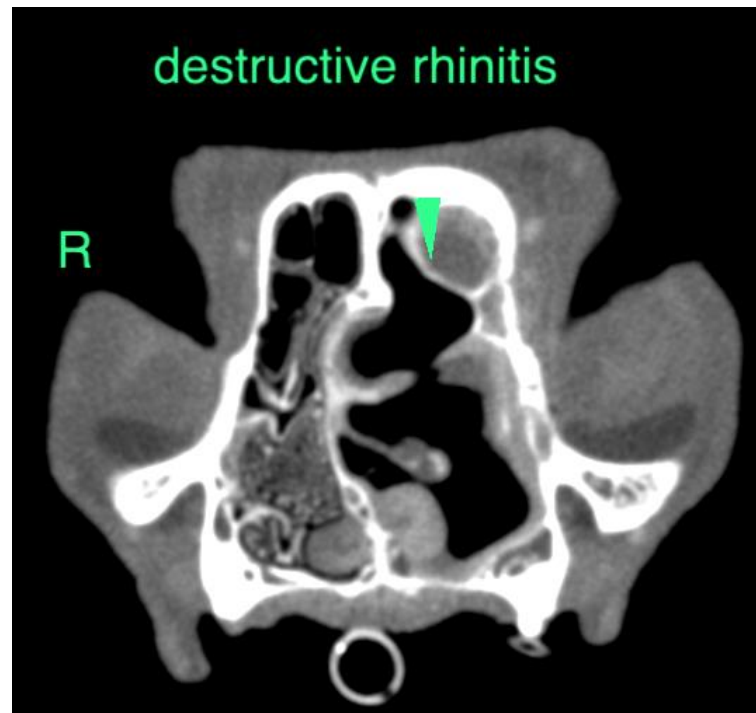
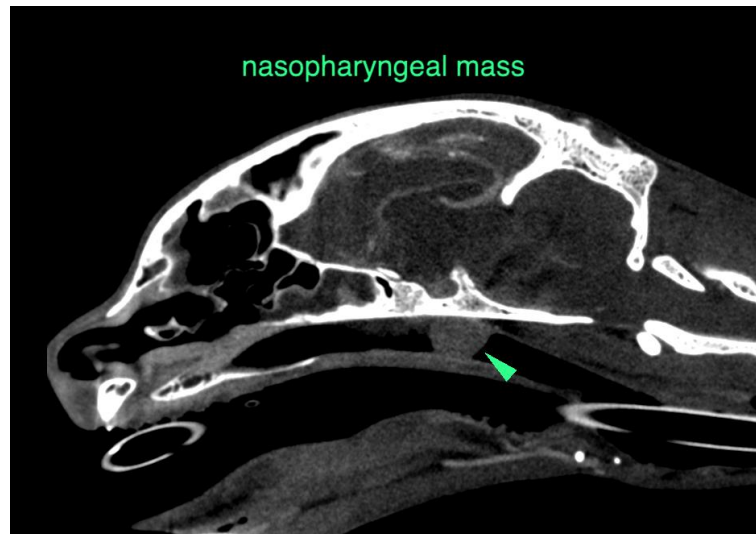
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**SPECIES**

Feline

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