



PATIENT PRESENTING CLINICAL SIGNS

Oliver Kurth History: see previous study(study date 7/19)-suspect otitis media with secondary perforation/lysis of the brain cavity with suspect focal meningitis. Possible polyp present. Pt is completely clinically resolved on clindamycin. Recheck CT to evaluate for presence of polyp and extent of bone healing.

SPECIES Abnormal PE/Chem/CBC/UA Results:

Feline **COMPUTED TOMOGRAPHIC STUDY OF THE SKULL**

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

BREED **COMPUTED TOMOGRAPHIC FINDINGS**

DSH The pictured parts of the dentition are complete and unremarkable in all jaw quadrants.

SEX The nasal cavity presents the expected aerated spaces between thin and even conchae and turbinates with smooth mucosal lining.

Neutered Male

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

AGE The right tympanic bulla is aerated and presents a moderately increased volume. The osseous lining of the right tympanic bulla presents multiple moth eaten osteolytic lesions with perforation of the wall. Post contrast administration a mild contrast enhancing swelling is following the osseous lining of the right tympanic bulla. The right auditory tube is moderately distended by gas. The osseous margin of the osseous labyrinth are mildly irregular.

4 Years

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.

HOSPITAL NAME

Queen Creek VC

The right submandibular and medial retropharyngeal lymph nodes are prominent and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

REFERRING VET **COMPUTED TOMOGRAPHIC DIAGNOSIS**

Dr. Makenzie Kurth,
DVM

- History of right sided advanced otitis media with intracranial extend
- Complete remission of the otitis media and meningoencephalitis
- Lymphadenopathy right mandibular and right medial retropharyngeal lymph nodes
- Persistent loss of the tympanic part of the right temporal bone – clinically not relevant

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

8/20/21



PATIENT

Oliver Kurth

The current CT study presents complete remission of the previous findings, at this point there is no evidence of meningoencephalitis or relevant otitis media but active remodeling of the osseous lining of the right tympanic bulla.

Persistent reactive hyperplasia of the tributary lymph nodes.

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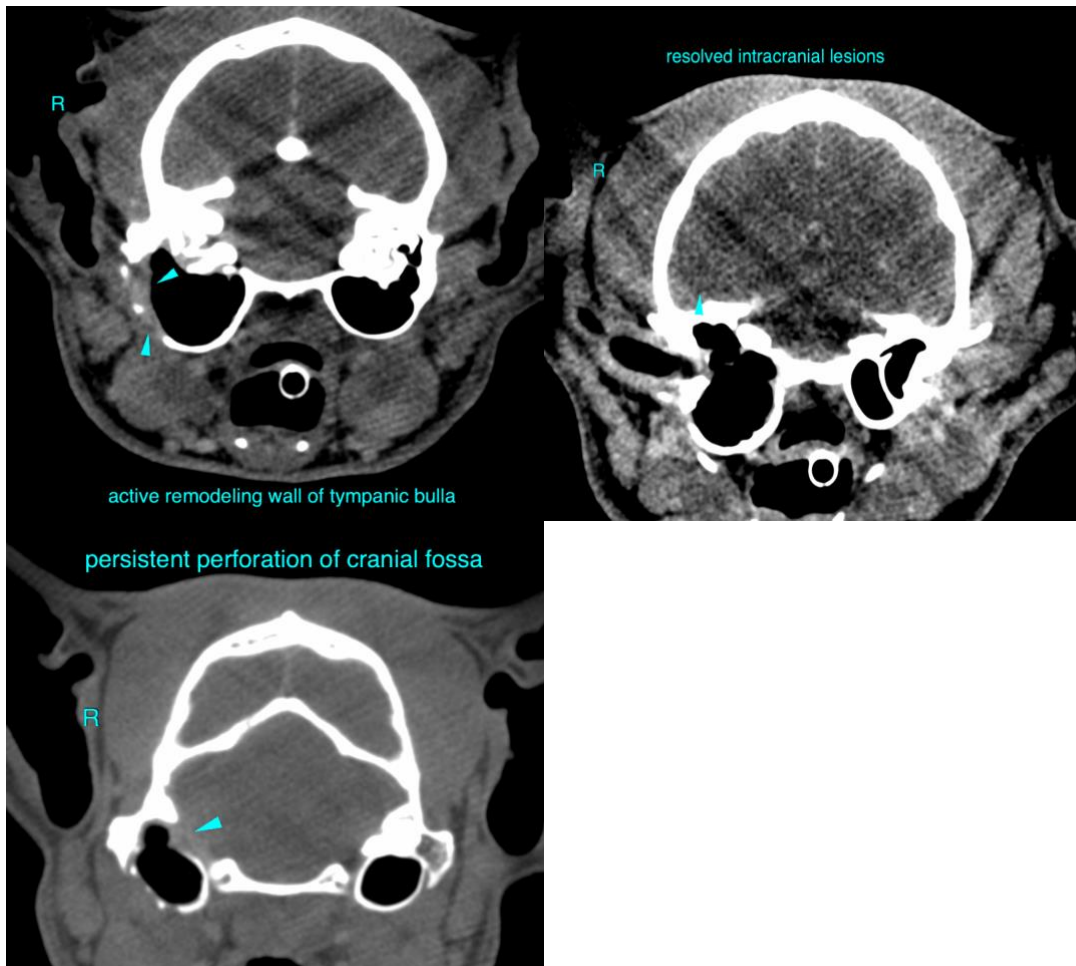
Sebastian Schaub,
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REFERRING VET

Dr. Makenzie Kurth,
DVM



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

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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

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