



PATIENT

Tiberius Majewski

PRESENTING CLINICAL SIGNS

Pet presented for chronic unilateral nasal discharge - unresponsive to clavamox and convenia in May and June of 2022. Tiberius first developed respiratory symptoms of cough and nasal congestion in March 2022. Pet has lost weight in the last year as well - was 13.5 lbs in October of 2021, now 8.25 lbs

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

Triadan 103, 301, 303, 307, 401 and 407 are absent. Retained roots of triadan 103, 307 and 407 are appreciated in the respective alveolar crest. The root of triadan 404 and the crown of triadan 208 present with resorptive lesions.

SEX

MN

In both nasal cavities, moderate amount of non-contrast enhancing material is attached to the nasal mucosal lining and extending up into the choanal.

The nasopharyngeal tonsils are prominent and protruding ventrally into the lumen of the nasopharynx.

AGE

12 Years

Both tympanic bullae are filled with non-contrast enhancing soft tissue material, the osseous lining is mildly thickened and smooth. The external ear canals are within normal limits.

INTERPRETED BY

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.

In the cranial fossa, a small, moderate contrast enhancing convex shaped mass is attached to the left parietal bone, measuring 3 x 3 x 4 mm in size.

HOSPITAL NAME

Wilson Veterinary
Hospital

The medial retropharyngeal lymph nodes are significantly enlarged and rounded, the attenuation and contrast enhancement pattern are uniform.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Rhinitis
- Enlarged nasopharyngeal tonsils
- Lymphadenopathy medial retropharyngeal lymph nodes
- Bilateral otitis media
- Small intracranial, extraaxial contrast enhancing mass level of left parietal lobe
- Resorptive lesions triadan 208 & 404
- Multiple absent teeth, retained roots 103, 307 and 407

REFERRING VET

Patterson Dog and
Cat Hospital

INVOICE

53691

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The material in the nasal cavity is suggestive for rhinitis, however given the significant enlargement of the medial retropharyngeal lymph nodes and the prominent nasopharyngeal tonsils, underlying neoplastic disease – especially round cell neoplasia – need to be ruled out by rhinoscopy including biopsy and FNA sampling of the enlarged medial retropharyngeal lymph nodes.

DATE

8-24-22



PATIENT

Tiberius Majewski

The bilateral otitis media is considered as a sequela to the rhinitis with ascending infection.

The intracranial contrast enhancing extraaxial mass is most consistent with meningioma, likely an incidental finding at this point – progressive growth can cause neurological clinical signs.

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

12 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Wilson Veterinary
Hospital

REFERRING VET

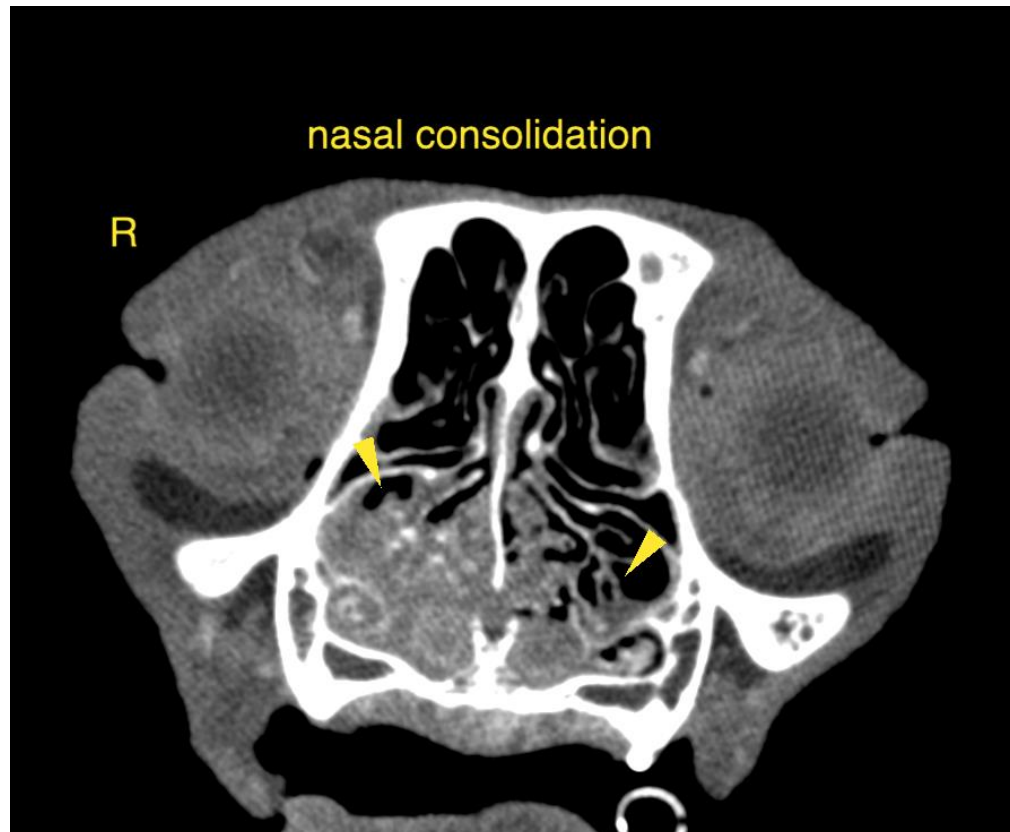
Patterson Dog and
Cat Hospital

INVOICE

53691

DATE

8-24-22





PATIENT

Tiberius Majewski

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

12 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

HOSPITAL NAME

Wilson Veterinary
Hospital

REFERRING VET

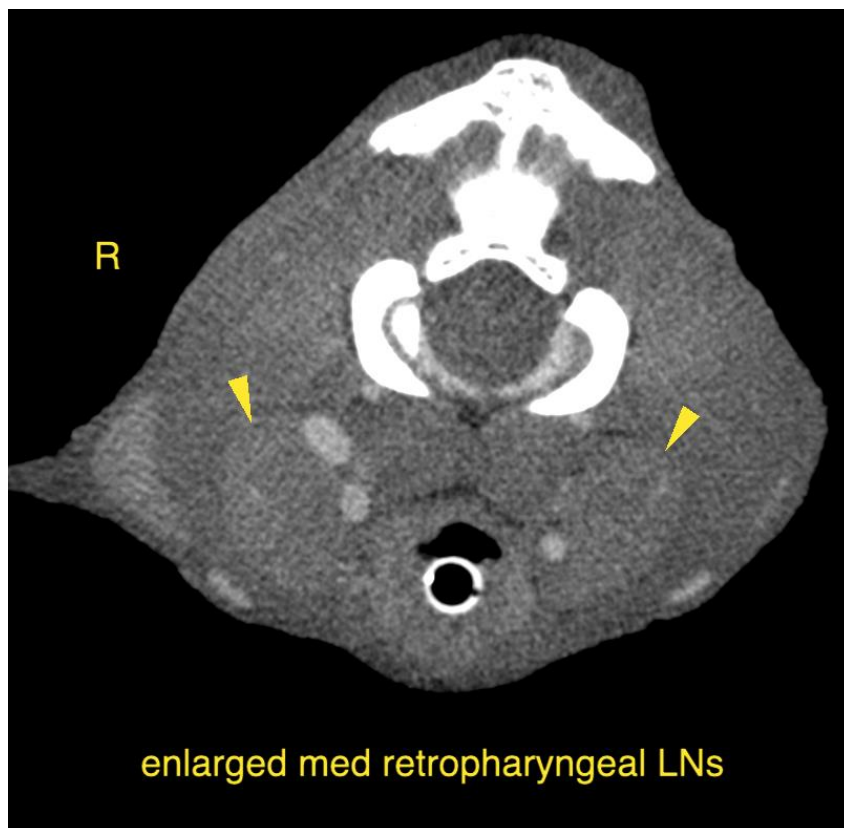
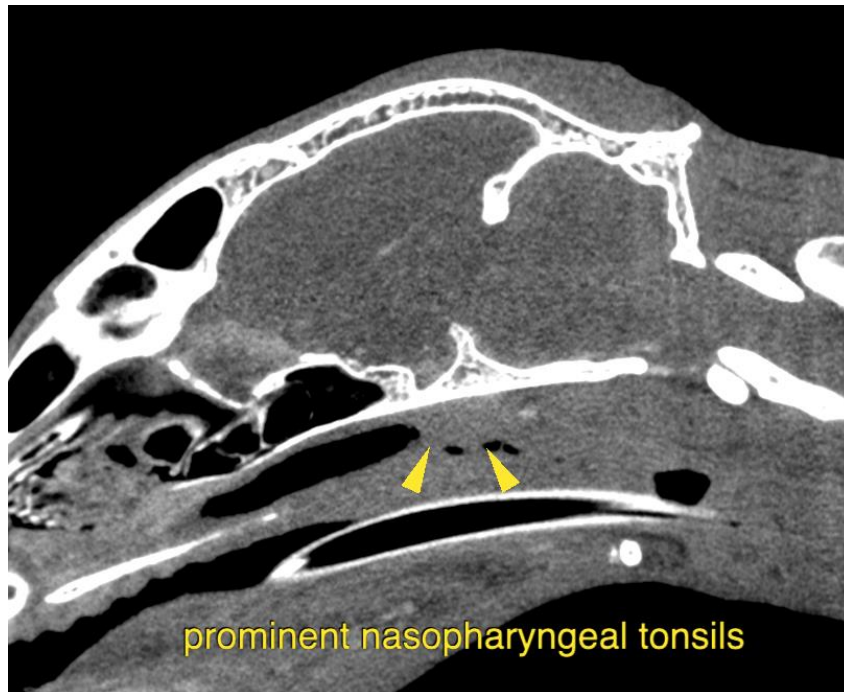
Patterson Dog and
Cat Hospital

INVOICE

53691

DATE

8-24-22





PATIENT

Tiberius Majewski

SPECIES

Feline

BREED

DSH

SEX

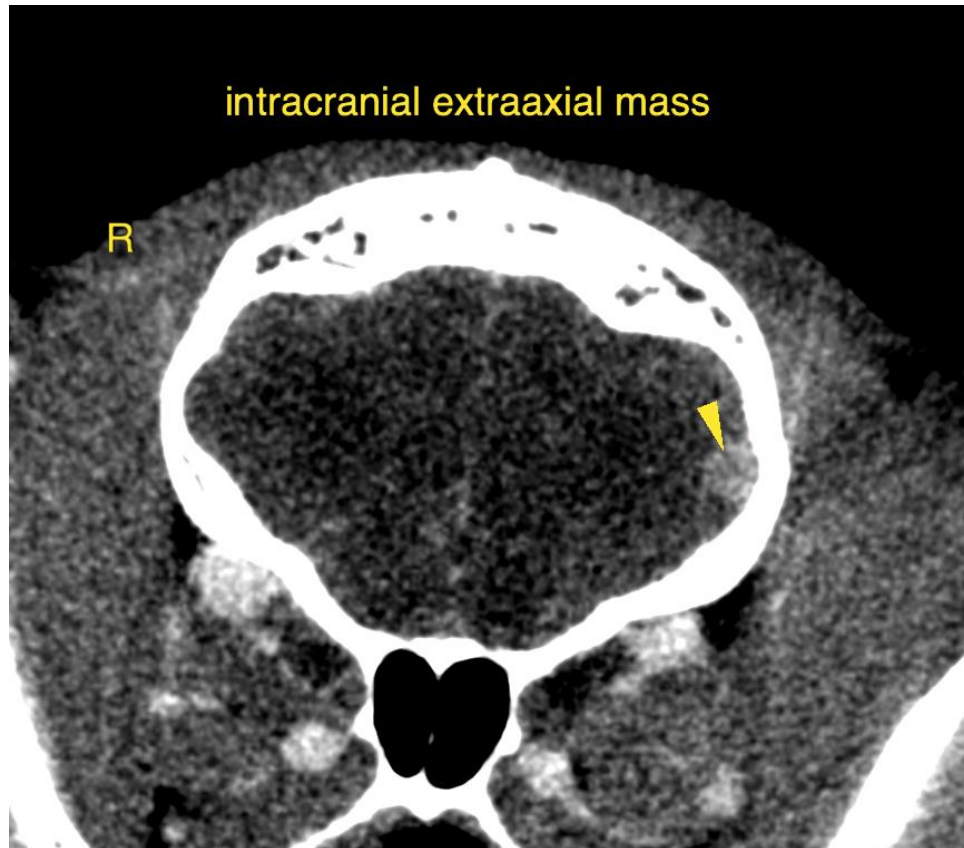
MN

AGE

12 Years

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI



HOSPITAL NAME

Wilson Veterinary
Hospital

REFERRING VET

Patterson Dog and
Cat Hospital

INVOICE

53691

DATE

8-24-22

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