



PATIENT PRESENTING CLINICAL SIGNS

Tiger Farber Presented for chronic left ear issues and left hornets syndrome. Also has a left head tilt.
Abnormal PE/Chem/CBC/UA Results: Normal

SPECIES COMPUTED TOMOGRAPHY OF THE SKULL & THORAX

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

COMPUTED TOMOGRAPHIC FINDINGS

BREED

Skull

DLH Multiple teeth are absent. Triadan 309&409 present with resorptive lesions.

SEX

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

AGE

MN Centered on the region of the left external ear canal, an ill-defined soft tissue attenuating and heterogeneous – peripherally accentuated – contrast enhancing mass is noted. The horizontal segment of the left external ear canal is obliterated by the soft tissue mass and continuity of the wall is lost. The mass is extending rostrally up to the to the left ramus of the mandible and caudally up to the level of the left ala of C1; extensive aggressive osteolytic lesions of the left temporal & parietal bone, occipital bone and the left ala of C1 is seen. Advanced lysis of the zygomatic process of the left temporal bone is appreciated. The mass is perforating the cranial fossa. In the medial aspect the mass is distorting the pharynx.

13

INTERPRETED BY

The left medial retropharyngeal lymph node is moderately enlarged.

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

Nodular enlargement of the right thyroid gland is noted, measuring up to 4.6 mm in diameter.

HOSPITAL NAME

Thorax

Northeast Veterinary
Referral Hospital

Multifocal spondylosis formation is noted along the caudal cervical spine and the thoracic spine. Both shoulder joints present mild osteophyte new bone formation. At the caudal aspect of the right shoulder joint, shell like mineralization are seen along the region of the joint capsule.

REFERRING VET

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.

Dr. Runde

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

INVOICE

Multifocal throughout the lung parenchyma, mild ill-defined roundish soft tissue attenuating lesions with variable size – measuring approximately up to 1.5 cm – are appreciated.

53810

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

DATE

COMPUTED TOMOGRAPHIC DIAGNOSIS

8-30-22

- Left sided ill-defined periauricular soft tissue mass with polyostotic aggressive osteolytic lesions and perforation of the cranial fossa
- Multiple regions with roundish consolidation of the lung parenchyma
- Lymphadenopathy left medial retropharyngeal lymph node



PATIENT

Tiger Farber

- Enlarged right thyroid gland – correlate with blood T4 level
- Spondylosis deformans
- Dental resorptive lesions triadan 309&409
- Multiple absent teeth
- Degenerative osteoarthritis shoulder joints bilaterally
- Synovial osteochondromatosis right shoulder joint

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INVOICE

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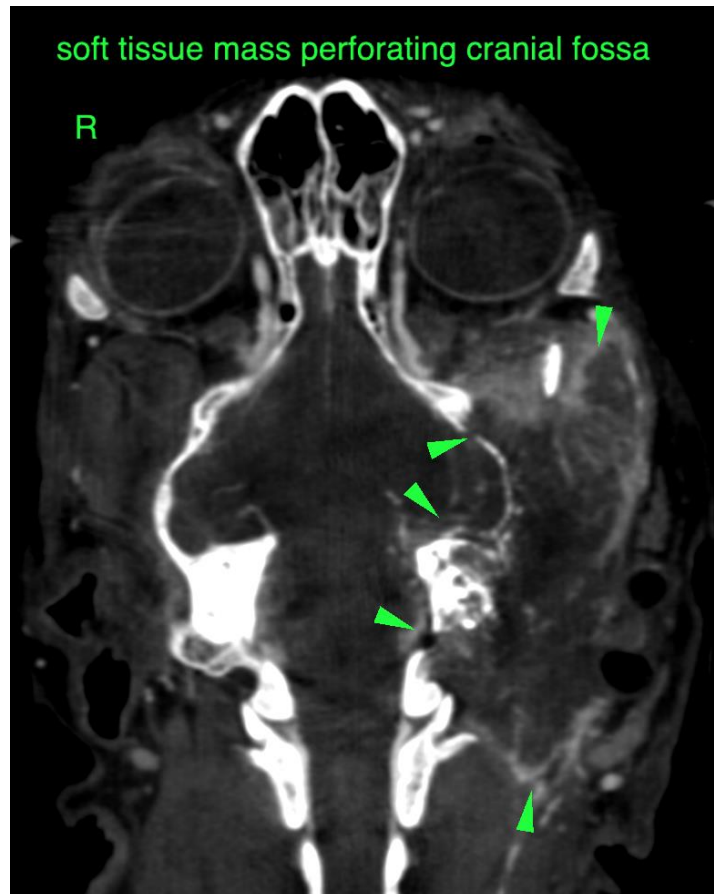
DATE

8-30-22

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The mass at the left side of the skull is likely originating from the left external ear canal and the top differentials include ceruminous gland adenocarcinoma, squamous cell carcinoma or melanoma. Secondary advanced aggressive osteolytic lesions of the associated osseous structures and perforation of the cranial fossa. FNA sampling of the mass can be used for further differentiation. The finding is explaining the presenting clinical signs. The odds for metastatic spread to the left medial retropharyngeal lymph node and the lung are considered high.

Treatment options are limited to palliative management of the patient.





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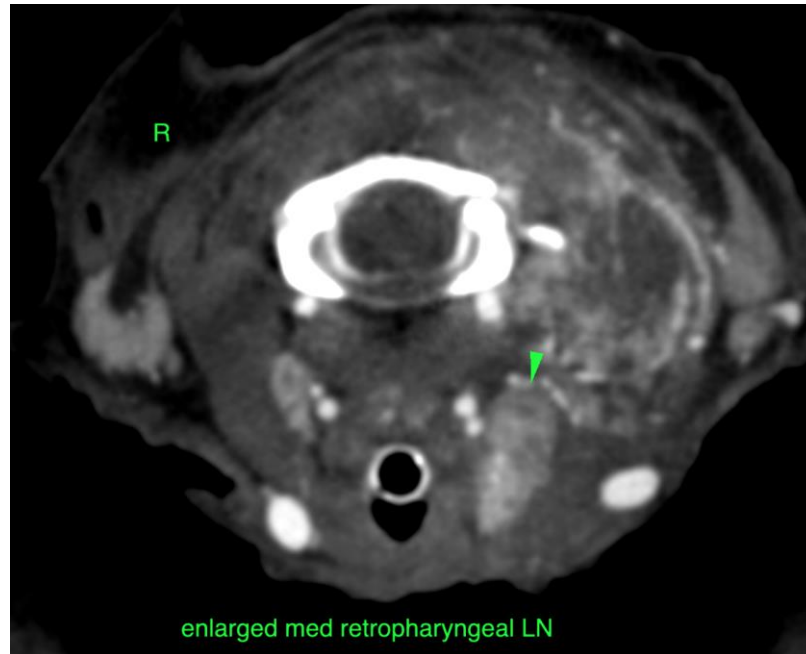
Dr. Runde

INVOICE

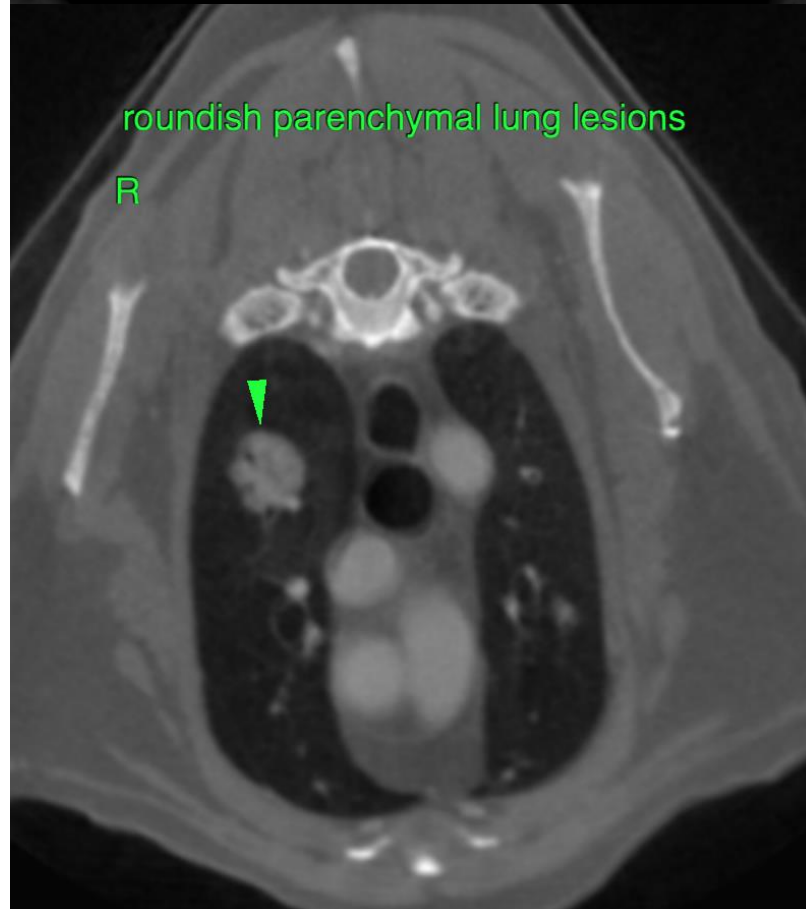
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enlarged med retropharyngeal LN



roundish parenchymal lung lesions



PATIENT

Tiger Farber

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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