



PATIENT PRESENTING CLINICAL SIGNS

Wolf Hibben History: Patient has progressive nasal symptoms that had been treated with doxycycline and Convenia and does not respond. Recently was started on famciclovir and BNP with dex nasal drops only two days prior to CT scan.

SPECIES
Feline Abnormal PE/Chem/CBC/UA Results: Had leukocytosis on day of CT; WBC's 30,000 with neutrophilia 26,800 and normal organ functions but hyperglobulinemia 6.6

COMPUTED TOMOGRAPHIC STUDY OF THE SKULL

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

COMPUTED TOMOGRAPHIC FINDINGS

SEX
All teeth but some incisor teeth are absent and the alveolar bone shows evidence of chronic remodeling.

Neutered Male Advanced destruction of the nasal conchal and turbinate structures is seen presenting as an empty nose. The nasal mucosal lining is moderately thickened. The left frontal sinus presents evidence of mild to moderate hyperostosis of the osseous lining. Segmental circumferential narrowing of the nasopharynx is noted - approximately in the caudal third with ring like segmental contrast enhancement.

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

INTERPRETED BY

Sebastian Schaub, DVM Dr. med. vet. DipECVDI Both tympanic contain non-contrast enhancing soft tissue material; the osseous lining is mildly thickened and smooth . The external ear canals are within normal limits.

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

Petroglyph AH The retropharyngeal lymph nodes are prominent.

COMPUTED TOMOGRAPHIC DIAGNOSIS

REFERRING VET

- Dr. Alice Ku
- Chronic destructive rhinitis
 - Possible nasopharyngeal stenosis
 - Hyperostosis left frontal sinus
 - Bilateral otitis media
 - Mild lymphadenopathy medial retropharyngeal lymph nodes bilaterally
 - History of full mouth extraction with chronic remodeling of the alveolar bone

INVOICE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

9/19/21

The findings are consistent with chronic destructive rhinitis. The causative agent is most likely primary viral with bacterial superinfection. Even though unlikely there is a small chance of emerging fungal (cryptococcal) superinfection.



PATIENT The possible nasopharyngeal stenosis – if present – is likely a sequela to chronic inflammation and is likely to contribute to clinical signs.

Wolf Hibben

The prominent medial retropharyngeal lymph nodes are consistent with secondary reactive lymphadenitis due to the underlying chronic rhinitis.

SPECIES

Feline

Rhinoscopy with biopsy and samples for microbial cultures is recommended. If nasopharyngeal stenosis is confirmed anti-inflammatory treatment would be indicated due to its suspected primary inflammatory origin. Clinical signs are likely to reoccur in chronic cases of rhinosinusitis.

BREED

DMH

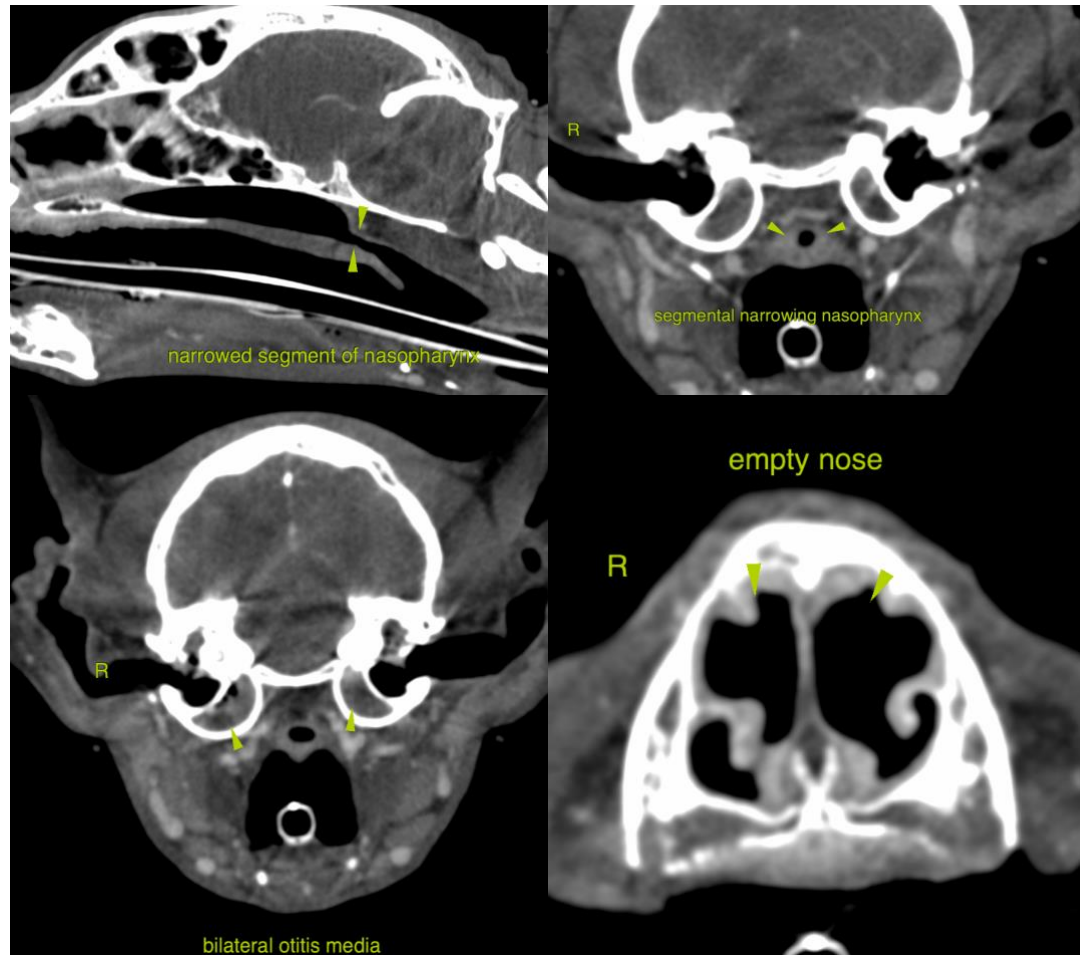
The bilateral otitis media is likely a sequela to upper respirator tract infection and ascending infection by the auditory tube

SEX

Neutered Male

AGE

14 Years



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Sebastian Schaub,
DVM Dr. med. vet.
DipECVDI

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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.



PATIENT 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.

Wolf Hibben

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Neutered Male

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