



PATIENT PRESENTING CLINICAL SIGNS

Finnegan Pfau Teeth chattering for 6+ months and increasing in frequency. Dental performed Sept 15th/22 with a right Maxillary dental block and crown amputation of 106. did well for the first two days after dental, then facial swelling noticed. Presented Sept 19/22 for swelling on bridge of nose, febrile, lethargic, inappetant and glaucoma OD.

SPECIES

Fel

Abnormal PE/Chem/CBC/UA Results: Has IRIS stage 2 chronic kidney disease. Bloods done at rDVM, WNL.

COMPUTED TOMOGRAPHY OF THE SKULL

BREED

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

DSH

COMPUTED TOMOGRAPHIC FINDINGS

The tooth elements 106, 307 and 407 are absent.

SEX

NM

In the ventral aspect of the right orbit, a peripheral heterogeneous contrast enhancing, and central fluid attenuating swelling is appreciated, measuring 14 x 9 x 15 mm in size. The swelling in the ventral aspect of the right orbit merges with the zygomatic salivary gland. The right ocular bulb is deviated dorsally and rostrally by the mass effect. The rostral part of the right masseter muscle presents with an increased heterogeneous contrast enhancement pattern.

AGE

15+

Generalized right sided periorbital soft tissue swelling.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

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

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

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. Protruding from the caudomedial wall of the left tympanic bulla into the lumen, a well-defined solid mineralized structure is seen, measuring 2.8 mm in size, presenting a fine trabecula center. The external ear canals are within normal limits.

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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.

REFERRING VET

Dr. Tait

The right mandibular and medial retropharyngeal lymph node are prominent.

The included cranial aspect of the right thyroid gland presents with nodular enlargement, measuring up to 9.3 mm in diameter.

INVOICE

54106

DATE

9-20-22

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Cavitary retrobulbar lesion right orbit
- Secondary right sided exophthalmos
- Lymphadenopathy right mandibular and medial retropharyngeal lymph nodes
- Focal myositis right masseter muscle
- Nodular enlargement right thyroid gland
- Absent triadan 106, 307 and 407
- Suspect small middle ear osteoma left tympanic bulla – considered incidental



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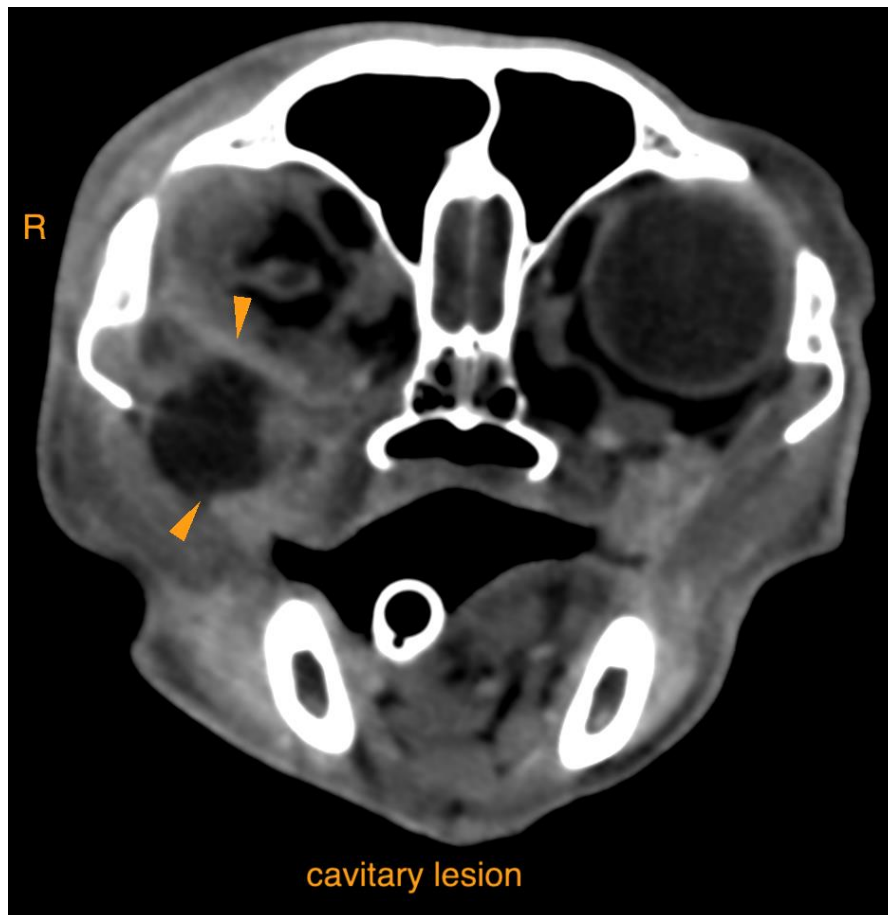
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The cavitory lesion in the ventral aspect of the right orbit in combination with the acute onset of clinical signs, the myositis and generalized periorbital swelling is highly suggestive for abscess formation and secondary reactive hyperplasia of the tributary lymph nodes. Theoretically zygomatic gland sialocele or neoplasia (such as myxosarcoma) are potentials, but the clinical course is unusual. Recommend surgical drainage of the cavitory lesion, including sampling for microbial culture and histopathology to rule out malignant transformation entirely.

The nodular enlargement of the right thyroid gland is suggestive for (non)functional thyroid adenoma – correlate with blood T4 value.





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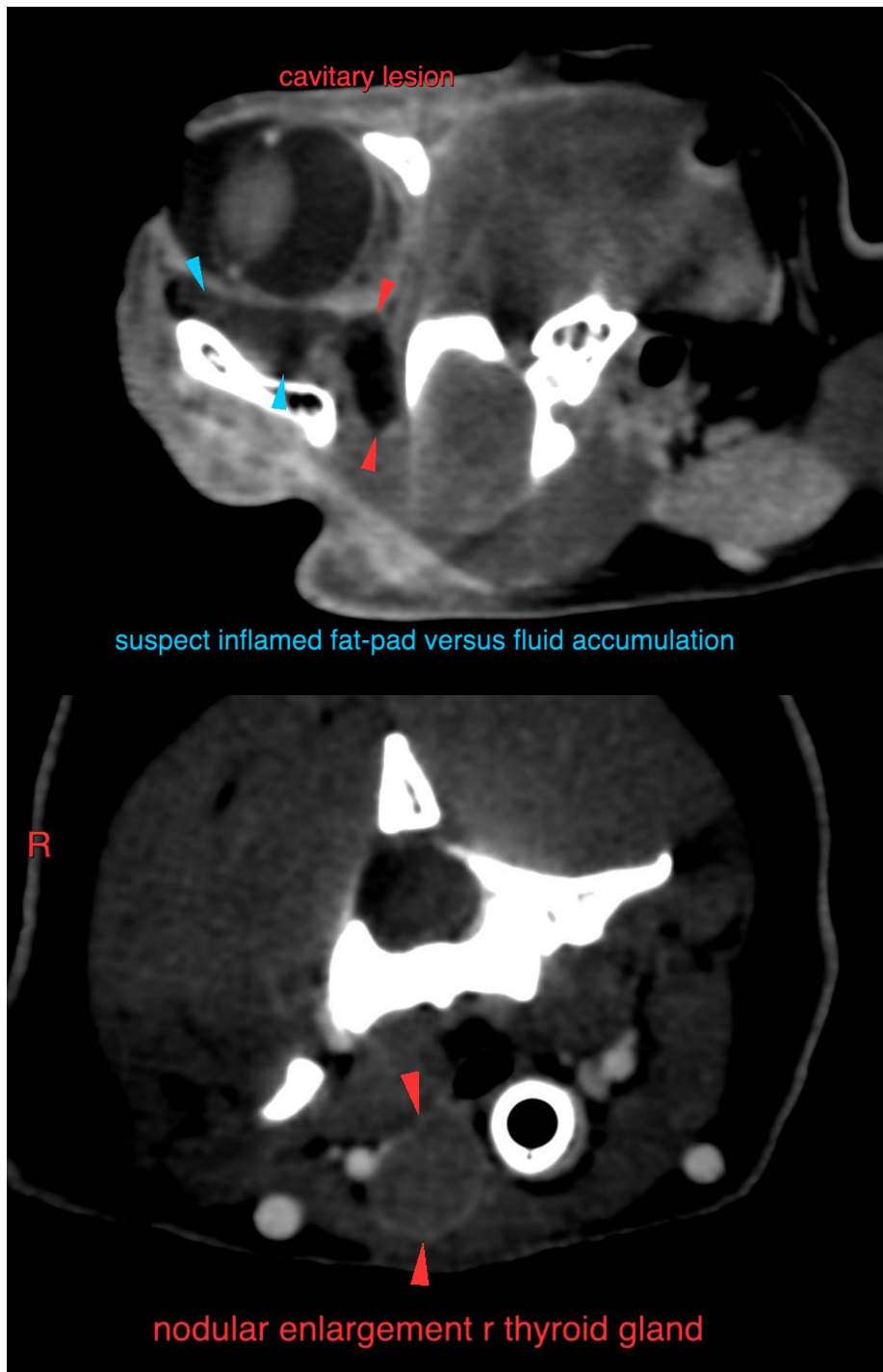
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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