

PATIENT

Hunter Kedzierska

SPECIES

Feline

BREED

Maine Coon

SEX

Neutered Male

AGE

13 Years

WEIGHT

14 Pounds

INTERPRETED BY

Tilde Rodrigues Froes,
DMV, MSc., Dr. Med
Vet., Dipl. CBraRVet

IMAGING PERFORMED BY

Dr. Kwasnik

HOSPITAL NAME

Animal Clinic of
Queens

REFERRING VET

Dr. Kwasnik

INVOICE

36450

DATE

3/31/26

PRESENTING CLINICAL SIGNS

History: Pt has chronic ear infections in the right ear.

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

A pre- and post-contrast CT study of the head are provided for review totaling 2 series. One pre-contrast series of the head bone algorithm. One post-contrast series of the head soft tissue algorithm.

COMPUTED TOMOGRAPHIC FINDINGS

HEAD

There is an elongated, mild contrast-enhancing soft tissue attenuating structure obliterating the horizontal portion of the right external auditory canal, associated with a small amount of surrounding fluid material. The lesion measures approximately 8.9 × 4.0 mm. There is also mild fluid attenuation material within the right tympanic cavity and soft tissue thickening in the region of the tympanic membrane. The osseous wall of the tympanic cavity is markedly thickened, irregular, and sclerotic, with chronic osseous remodeling/deformation.

The left external auditory canal remains aerated. Mild soft tissue/fluid attenuation material and/or mild thickening are present in the left tympanic cavity and in the region of the left tympanic membrane. The osseous wall on the left is mildly thickened, no evidence of interruption.

The right medial retropharyngeal and right lateral retropharyngeal lymph nodes are mildly enlarged, while maintaining a normal shape.

The left medial retropharyngeal and mandibular lymph nodes are within normal size and morphology.

The nasopharynx and soft palate are within normal limits.

There is mild focal hypoattenuating fluid accumulation within the caudal left nasal cavity, protruding into the left sphenoidal sinus.

The remaining nasal cavities, turbinates, and cribriform plate are unremarkable. The frontal sinuses and right sphenoidal sinus are within normal limits.

No evidence of intracranial mass effect or falx cerebri shift is identified.

The temporomandibular joints are bilaterally congruent.

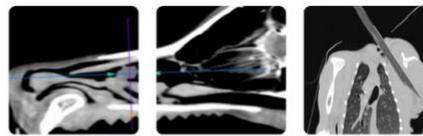
The globes and retrobulbar spaces are unremarkable.

The mandibular, parotid, and zygomatic salivary glands are unremarkable.

Triadan 109, 201, 206, 209, 309, and 409 are absent. Multifocal tooth resorptive lesions are present, most pronounced in the mandibular dentition.

COMPUTED TOMOGRAPHIC DIAGNOSIS

Marked chronic right-sided otitis externa and otitis media, concurrent enhancing soft tissue attenuating lesion obstructing the horizontal portion of the right external auditory canal, mild fluid accumulation within the right tympanic cavity, and severe chronic osseous remodeling/sclerosis of the adjacent osseous tympanic bulla. Differential diagnoses include an aural polyp or chronic inflammatory



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soft tissue proliferation/granulation tissue; neoplasia (e.g., ceruminous gland adenoma) is considered less likely, concurrent chronic otitis media.

Mild chronic left-sided otic changes, including mild soft tissue/fluid attenuation within the tympanic cavity and/or thickening at the level of the tympanic membrane. Mild osseous wall thickening, compatible with mild chronic otitis media.

Mild enlargement of the right medial and lateral retropharyngeal lymph nodes, most consistent with reactive lymphadenopathy.

Mild focal fluid accumulation within the caudal left nasal cavity and left sphenoidal sinus, compatible with mild rhinosinus fluid retention or mild inflammatory change.

Multiple missing teeth and multifocal feline tooth resorption lesions, especially affecting the mandibular dentition.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

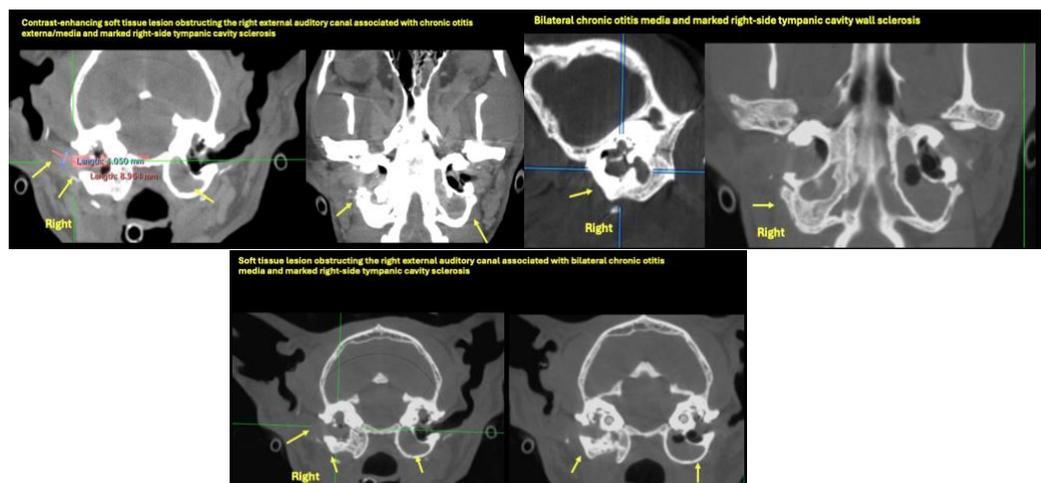
The tomographic findings are most consistent with advanced chronic right-sided otitis externa/media, with marked chronic remodeling of the adjacent osseous structures. The soft tissue attenuating lesion within the right external auditory canal most likely represents inflammatory proliferative tissue, such as an aural polyp or granulation tissue. Although considered less likely, neoplasia cannot be completely excluded based on CT findings alone.

The mild enlargement of the right retropharyngeal lymph nodes is most likely reactive.

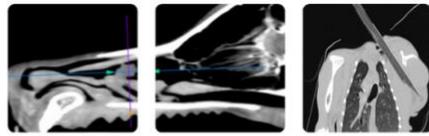
Mild chronic left-side otitis media.

Correlation with otoscopic examination, and if clinically indicated, cytology, culture and sensitivity, and histopathology/biopsy of the right-sided lesion is recommended for definitive diagnosis and therapeutic planning.

Correlation of the dental findings with a complete oral examination is also suggested.



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.

Tilde Rodrigues Froes, DMV, MSc., Dr. Med.Vet., Dipl.CBraRVet
info@sonopath.com