



## PATIENT

A Bhubain Bliesener

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

FS

## AGE

4Y

## WEIGHT

6lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Tina Lynn,  
CVT/George  
Eales, DVM

## HOSPITAL NAME

Green Prairie Animal  
Hospital

## REFERRING VET

White Oaks West  
Animal Hospital

## INVOICE

74697

## DATE

4-21-26

## PRESENTING CLINICAL SIGNS

Presented for wellness exam on 4/16/22 was determined at that time that cat had otitis and treated with Simplera. Patient developed head tilt, anisocoria and ataxia the next day.

## COMPUTED TOMOGRAPHIC STUDY OF THE HEAD

A pre- and post-contrast CT study of the head is provided for review totaling 3 series. One pre-contrast series of the head bone algorithm. Two post-contrast series of the head, bone algorithm.

## COMPUTED TOMOGRAPHIC FINDINGS

The left tympanic cavity is partially filled with hypoattenuating fluid material. The osseous margins are preserved, with no evidence of bone lysis, hyperostosis, or expansile changes.

The right tympanic cavity is air-filled and unremarkable.

The petrous portions of the temporal bones are within normal limits.

The external auditory canals are unremarkable bilaterally.

No evidence of intracranial mass effect, midline shift, or ventriculomegaly is identified.

The globes and retrobulbar spaces are within normal limits.

The nasal cavities and turbinates are unremarkable. The cribriform plate is intact.

The oropharynx, nasopharynx, and soft palate are within normal limits. The frontal sinuses are unremarkable.

Dentition and associated alveolar bone are within normal limits.

The temporomandibular joints are bilaterally congruent.

The medial retropharyngeal and mandibular lymph nodes are within normal limits.

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

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- Partial fluid filling of the left tympanic cavity, consistent with otitis media, without evidence of aggressive osseous involvement.
- No CT evidence of intracranial extension or other structural abnormalities to explain the reported neurological signs.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The findings are most consistent with left-sided otitis media, which may correlate or not with the patient's clinical signs. However, CT evaluation shows no evidence of intracranial involvement or other central causes for the neurological abnormalities.



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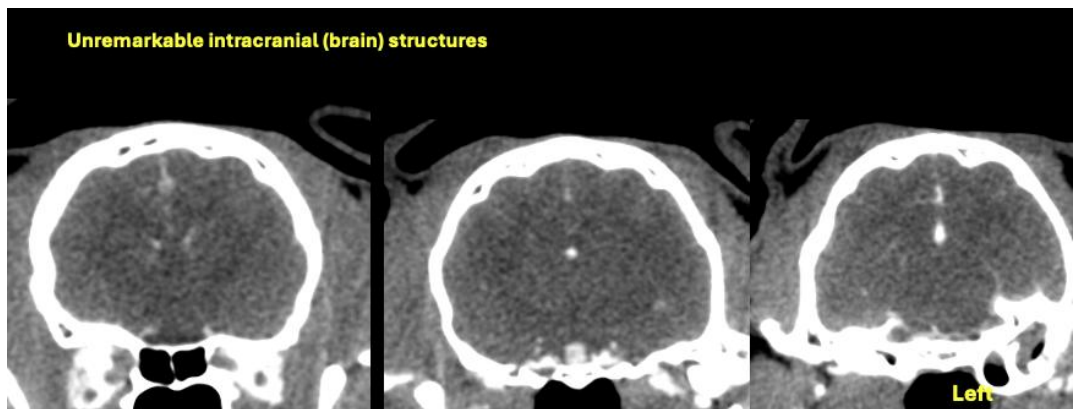
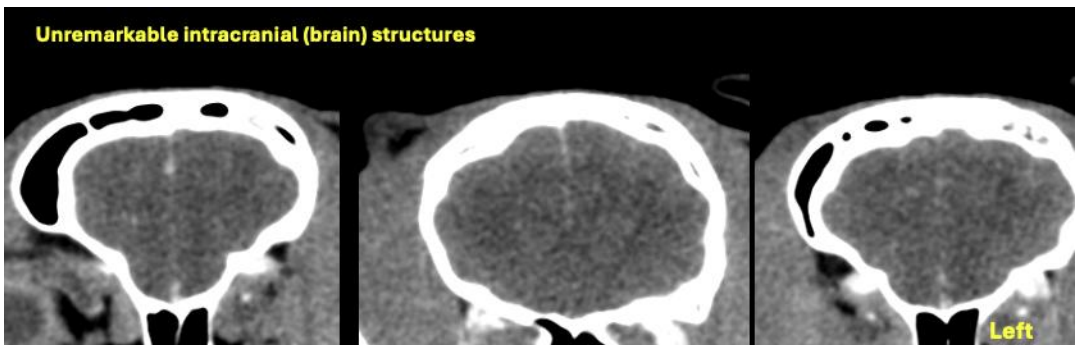
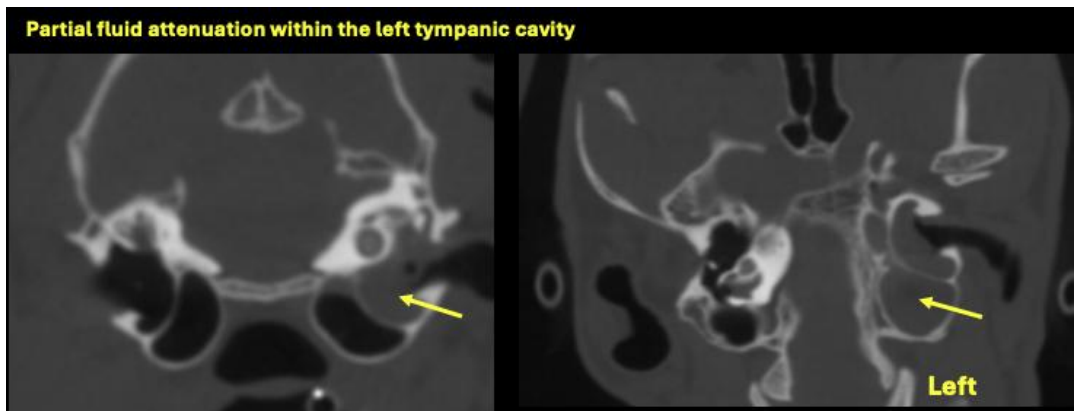
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CT has limited sensitivity for the assessment of tympanic membrane integrity; therefore, its continuity cannot be confidently confirmed or excluded on the basis of tomographic findings alone. Correlation with otoscopic findings, as well as consideration of culture and sensitivity testing of middle ear contents (if clinically indicated), is advised.

Further evaluation with MRI of the brain and inner ear structures is recommended if clinical signs persist or worsen.





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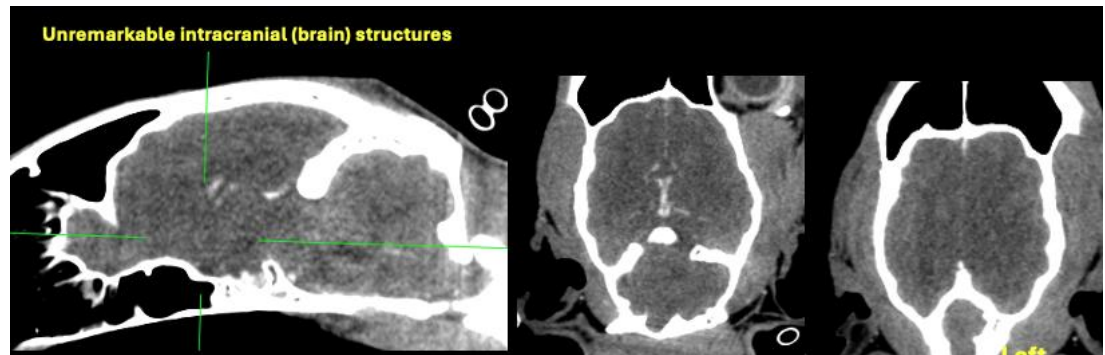
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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](mailto:info@sonopath.com)