



PATIENT PRESENTING CLINICAL SIGNS

Leia Pirovolikos AD polyp –

COMPUTED TOMOGRAPHIC STUDY OF THE HEAD AND THORAX

SPECIES

Feline

A post-contrast CT study of the head and thorax are provided for review totaling 1 series. One post-contrast series of the head, soft tissue algorithm.

COMPUTED TOMOGRAPHIC FINDINGS

BREED

DSH

HEAD

SEX

FS

AGE

7 Years

A large, irregular, soft tissue attenuating, and heterogeneously enhancing mass effect is completely filling the right tympanic cavity. The mass is extending throughout the ipsilateral external auditory canal, causing loss of distinction of the auditory canal wall, spanning to the adjacent soft tissue and structures. Due to the ill-defined borders, it is difficult to measure the lesion. The adjacent muscles are also heterogeneous and apparently involved in the mass and include the masseter, parotid fascial, and part of the digastric muscle. The ipsilateral salivary gland, mandibular lymph nodes, and retropharyngeal lymph nodes are also enlarged and surrounded by the mass.

The right tympanic bulla contour is interrupted, with expansile osteolytic appearance and presenting severe hyperostosis.

The heterogeneous mass effect is protruding from the right tympanic cavity onto the nasopharynx and is completely obstructing the nasopharynx lumen in some portions. The nasopharynx mass measures approximately 1.4cm by 1.0cm.

INTERPRETED BY

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

The right medial retropharyngeal lymph node, the mandibular lymph nodes and the parotid lymph nodes are enlarged, with partially defined borders, rounded, and heterogeneously enhanced.

The left tympanic bulla, external auditory canal, ipsilateral glands, and lymph nodes are unremarkable.

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The triadan 103 is absent. There is diffuse horizontal and vertical alveolar bone loss along the remaining teeth.

The nasal cavities, turbinates and choana are normal.

The cribriform plate is intact.

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The frontal sinuses are unremarkable.

No mass effect is seen in the brain, normal attenuation.

The temporomandibular joints are bilaterally congruent.

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The globes and retrobulbar spaces are unremarkable.

DATE

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THORAX



PATIENT The trachea is normal in luminal diameter and position.

Leia Pirovolikos The left cranial lung lobe volume expansion is reduced with enhanced alveolar consolidation pattern. The remaining pulmonary parenchyma is normal. No evidence of soft tissue nodules in the aerated parenchyma.

SPECIES The cardiac silhouette and pulmonary vessels are normal. The contrast media adequately fills the cardiac chambers and vessels on post-contrast series.
Feline

The tracheobronchial lymph nodes are normal.

BREED The sternal, mediastinal, and cranial mediastinal lymph nodes are unremarkable.

DSH The pleural space and diaphragm are normal.

SEX **COMPUTED TOMOGRAPHIC DIAGNOSIS**

FS

- Right side aggressive and invasive mass effect affecting the external auditory canal, tympanic bulla, and adjacent structures such as the masseter, parotid fascial, and part of the digastric muscles, mandibular salivary gland, and involving the retropharyngeal and mandibular lymph nodes. The differential diagnosis includes neoplasms; however, concurrent soft tissue abscessation and infectious otitis could be considered.

AGE 7 Years

- Expansile osteolytic appearance with interruption and hyperostosis of the right tympanic bulla wall, correlated to the mass and associated otitis media.

- The mass effect protrudes onto the nasopharynx, obstructing almost the entire airway passage in some portions. The differential diagnosis includes an extension of the tympanic mass, or concurrent nasopharyngeal adenomatous polyp.

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- Right side enlarged medial retropharyngeal and mandibular lymph nodes, metastatic.
- Diffuse periodontal disease, and absent 103 triadan.
- Left cranial lung lobe atelectasis. The differential diagnosis includes focal bronchopneumonia, or focal aspiration pneumonia.
- No evidence of pulmonary metastatic disease.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The tomographic findings confirm the nasopharyngeal polyp/mass; however, it is likely correlated to the right-side tympanic bulla and external auditory canal mass effect. The ill-defined borders of the lesion and the involvement of the ipsilateral lymph nodes show aggressive behavior. The differential diagnosis is neoplasm, for example, ceruminous adenocarcinoma, squamous cell carcinoma, or invasive tympanokeratomas. To confirm the etiological diagnosis, a biopsy is required.

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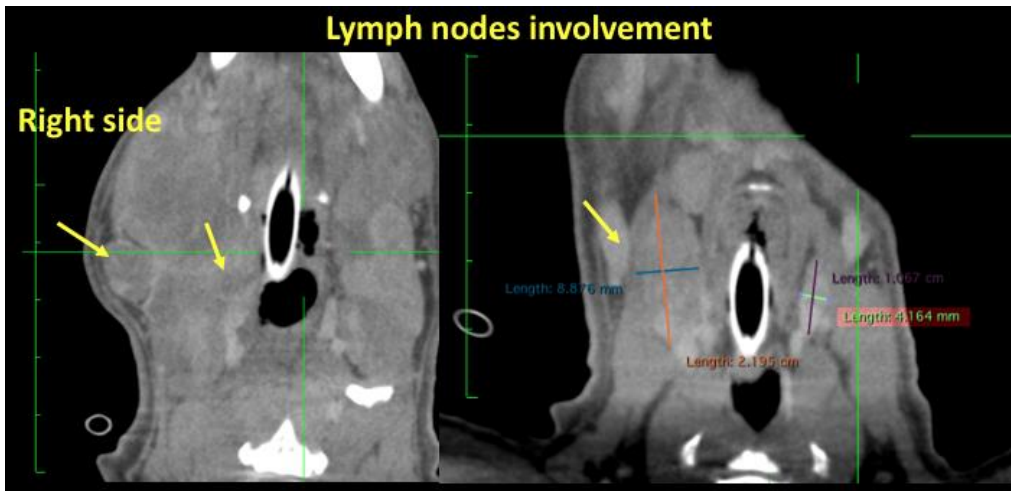
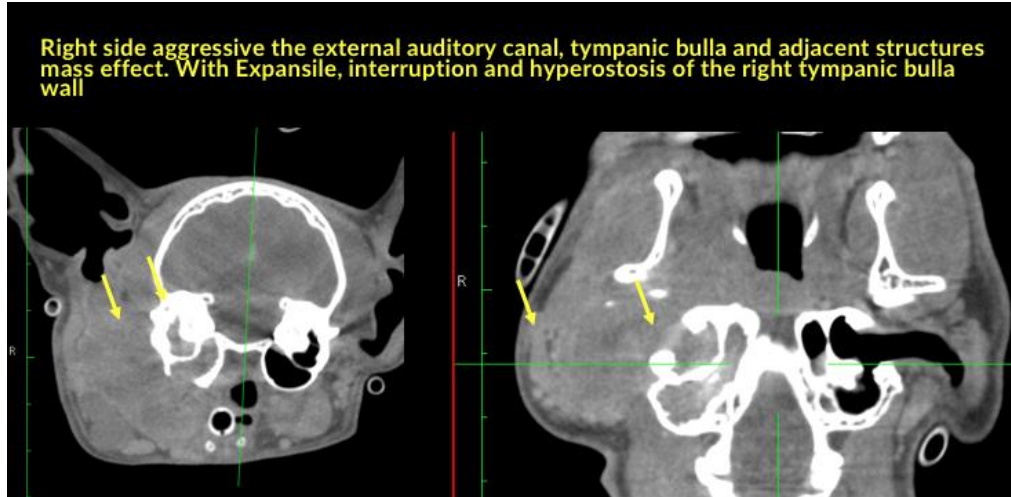
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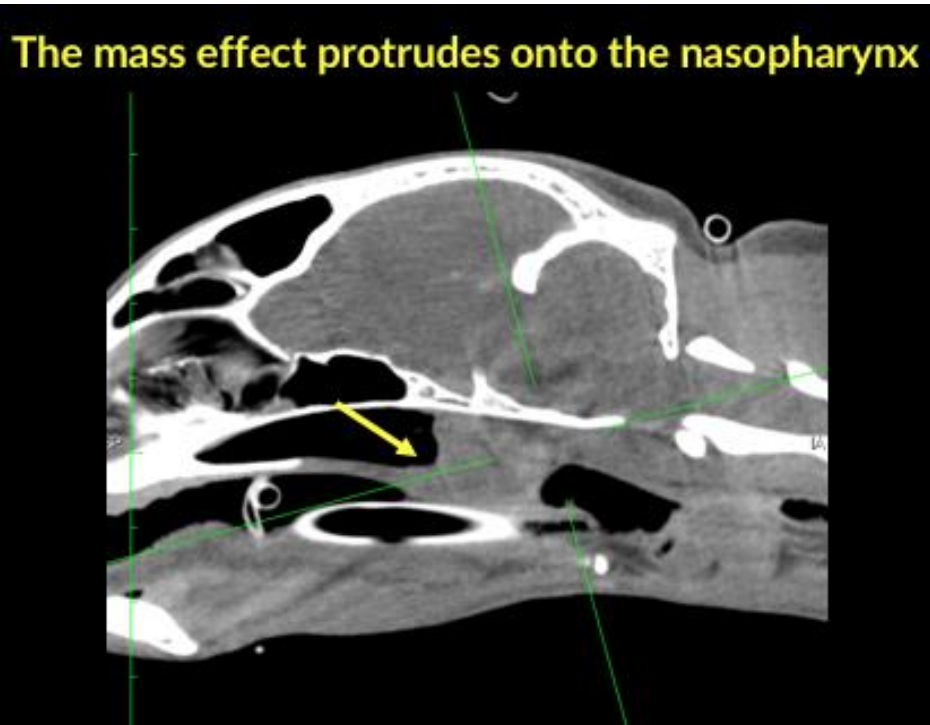
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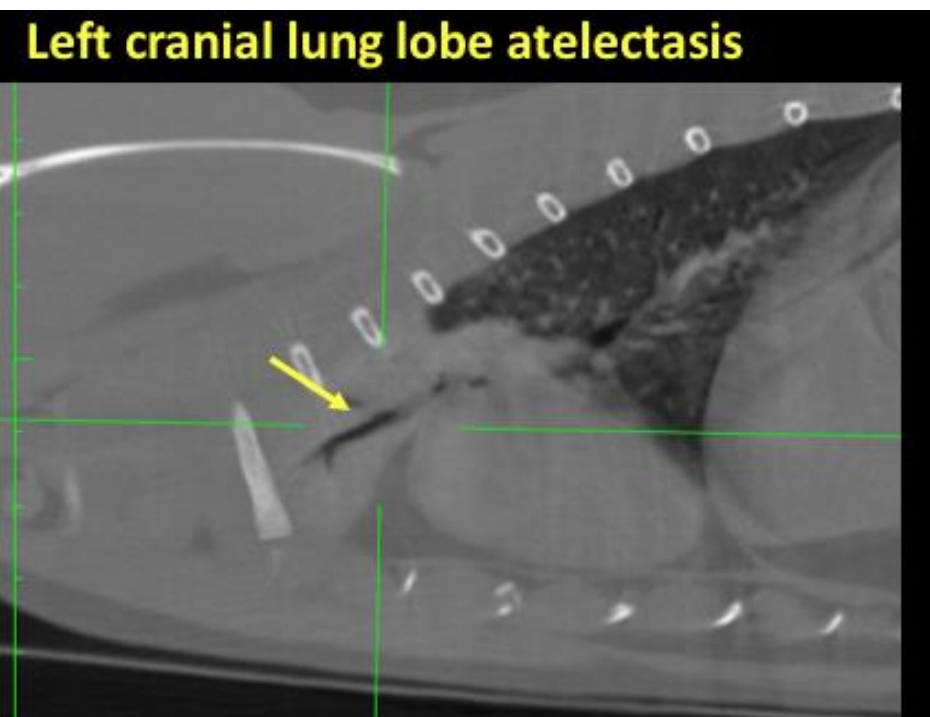
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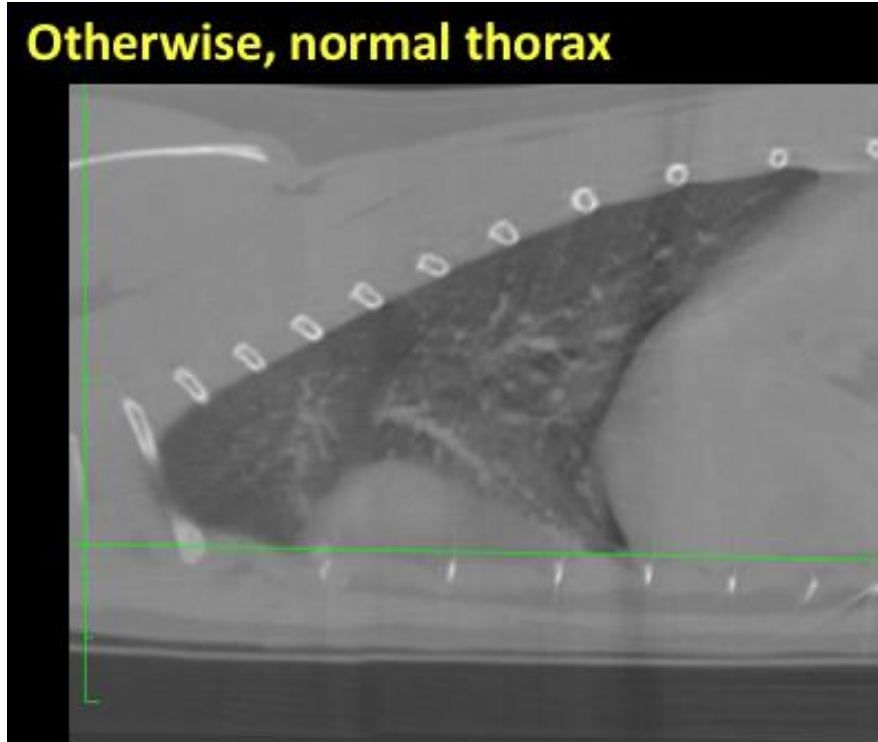
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AGE

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Otherwise, normal thorax



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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.

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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.

REFERRING VET

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