



PATIENT

Sissel Sanchez Mejia

SPECIES

Feline

BREED

American Shorthair

SEX

Male Neutered

AGE

8Y, 8M, 22D

WEIGHT

18.4

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

IMAGING PERFORMED BY

DTLAvets

HOSPITAL NAME

DTLAvets

REFERRING VET

Dr. Castaneda

INVOICE

73218

DATE

1-7-26

PRESENTING CLINICAL SIGNS

cough started 2-3 weeks ago; no smoking or aerosols in the home; Upper Resp PCR and baseline labs are pending; P is strictly indoors - no travel (lives in Southern California)

RADIOGRAPHIC STUDY OF THE THORAX

Right/left lateral and ventrodorsal views totaling 3 images available for review.

RADIOGRAPHIC FINDINGS

The cardiac silhouette presents within normal limits. The VHS is 7.5. Pulmonary vasculature presents within normal limits.

Mild caudodorsally accentuated bronchial lung pattern is noted. No evidence of alveolar infiltrates, nodules, or consolidation is identified. The pulmonary volume and margins are normal.

The mediastinum and pleura present within normal limits. There is no evidence of abnormal mediastinal or pleural space widening.

The trachea and mainstem bronchi are normal in caliber and course.

Mild esophageal aerophagia is noted.

The diaphragm, thoracic wall, and visible osseous structures are unremarkable.

RADIOGRAPHIC DIAGNOSIS

- Mild caudodorsal bronchial lung pattern.
- Normal radiographic presentation of cardiovascular structures, mediastinum, and pleural space.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study reveals a mild caudodorsally accentuated bronchial lung pattern which may correlate with early or mild bronchial inflammation and chronic airway irritation. Given the history of cough in a strictly indoor cat, differential considerations include allergic bronchitis or mild chronic inflammatory airway disease as well as early infectious process such as viral (herpes calici) or bacterial, pending PCR and laboratory results. No radiographic evidence of active pneumonia, cardiogenic pulmonary edema, pulmonary consolidation, or other significant thoracic pathology is seen. Correlate radiographic findings with PCR panel results and lab work to rule out infectious etiologies. Consider airway cytology if cough persists. Supportive therapy or trial of bronchodilator medications may be appropriate depending on clinical assessment.



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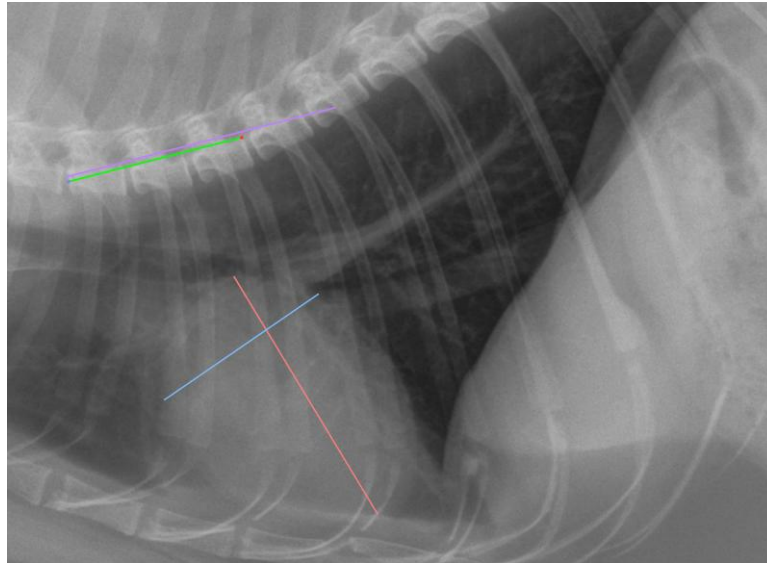
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley (Ondreka), DVM, Dr. med. vet., DipECVDI
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