



## PATIENT

Bentley Vaughan

## SPECIES

Canine

## BREED

Papillion

## SEX

NM

## AGE

12Y, 4M

## WEIGHT

5.68

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Rivera

## HOSPITAL NAME

DPC Veterinary  
Hospital

## REFERRING VET

Rivera

## INVOICE

72894

## DATE

12-8-25

## PRESENTING CLINICAL SIGNS

Owner reports over the past weekend, Pet has begun "honking" like cough

Abnormal PE/Chem/CBC/UA Results: grade IV-V/VI heart murmur, Crackles bilaterally, Dry non-productive cough elicited on tracheal palpation 4dx: Negative

## RADIOGRAPHIC STUDY OF THE THORAX

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

## RADIOGRAPHIC FINDINGS

The cardiac silhouette is normal in size and morphology. The VHS is 10.1. Evidence of cardiac chamber enlargement or pulmonary vessel dilation is not seen.

A mild generalized bronchial lung pattern is noted.

There is a tracheal stripe sign consistent with small air accumulation within the esophagus, which is an incidental finding.

Severe tracheal collapse most pronounced in the cervical region with signs of upper airway restriction is seen. There is no evidence of alveolar consolidation or pulmonary nodules.

The pleural space and mediastinum present within normal limits.

## RADIOGRAPHIC DIAGNOSIS

- Radiographic signs of severe cervical dynamic tracheal disease.
- Mild bronchial lung pattern suggesting concurrent chronic airway inflammation.
- Normal radiographic presentation of cardiovascular structures.

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The radiographic findings are consistent with tracheal collapse which appears to correlate with the patient's clinical signs. The presence of a mild bronchial pattern may indicate chronic inflammatory airway disease secondary to tracheal instability or superinfection.

The heart is radiographically normal, however, there appears to be a significant cardiac murmur which warrants clinical correlation and possible echocardiography.

Medical management of the dynamic tracheal disease can be attempted. Further evaluation for tracheal stenting by means of endoscopy can be considered should the clinical signs persist or worsen. Empirical management of airway inflammation can be considered.



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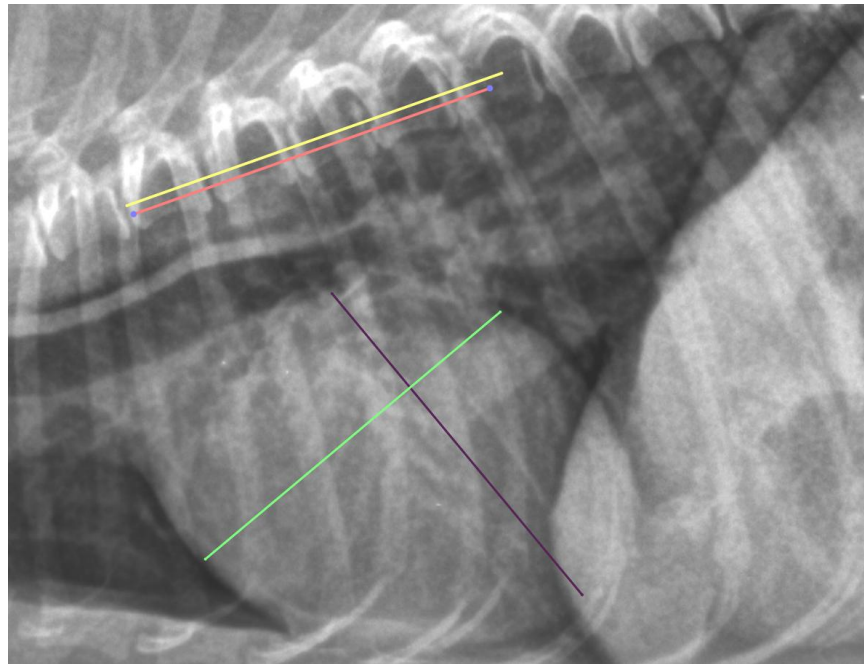
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,  
Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.  
[info@sonopath.com](mailto:info@sonopath.com)