



PATIENT

Benji Estrada

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

12Y

WEIGHT

11.63lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Faith Animal Care

HOSPITAL NAME

Faith Animal Care

REFERRING VET

Dr. Faith

INVOICE

73754

DATE

2-16-26

PRESENTING CLINICAL SIGNS

- Patient has a chronic cough that has been worsening and owner believes he has been losing weight
- Bloodwork did show a UTI that he is currently being treated for
- Bloodwork also showed elevated bicarbonate, Cardiopet Pro BNP was within normal limits
- Concern for metastatic disease vs feline asthma

Abnormal PE/Chem/CBC/UA Results: Attached most recent bloodwork results

RADIOGRAPHIC STUDY OF THE THORAX

Right lateral and ventrodorsal views totaling 2 images available for review.

RADIOGRAPHIC FINDINGS

Moderate generalized bronchial pattern with marked peribronchial cuffing is noted throughout the lungs. Occasional small nodular opacities are present. Differentials include end-on bronchi, mucus plugging of bronchi, fibrotic or pneumonic nodules, small granulomas, and less likely metastatic disease.

The cardiac silhouette is normal in size and shape. No evidence of cardiac remodeling or cardiomegaly is seen. The VHS is approximately 7.6 which is within normal limits.

The trachea is normal in diameter, position, and wall definition.

The mediastinum is unremarkable.

Pleural space presents within normal limits with no evidence of effusion or pneumothorax.

RADIOGRAPHIC DIAGNOSIS

- Diffuse bronchial pattern with cuffing consistent with chronic inflammatory airway disease such as feline asthma or chronic bronchitis.
- Occasional small nodular opacities of uncertain significance – see below for differential diagnosis.
- No evidence of cardiomegaly or congestive heart failure.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The findings are most consistent with chronic inflammatory airway disease, but nodular opacities warrant monitoring. Differential diagnoses for the occasional small nodular opacities include end-on bronchi, mucus plugs, granulomas, small fibrotic/pneumonic nodules, and less likely metastatic disease. Close monitoring of clinical signs and patient weight is recommended. Airway sampling with transtracheal wash or BAL could be considered if clinical signs persist or worsen. Environmental management may be beneficial. Repeat thoracic radiographs (or advanced imaging such as CT) to monitor if nodules persist or increase in size.



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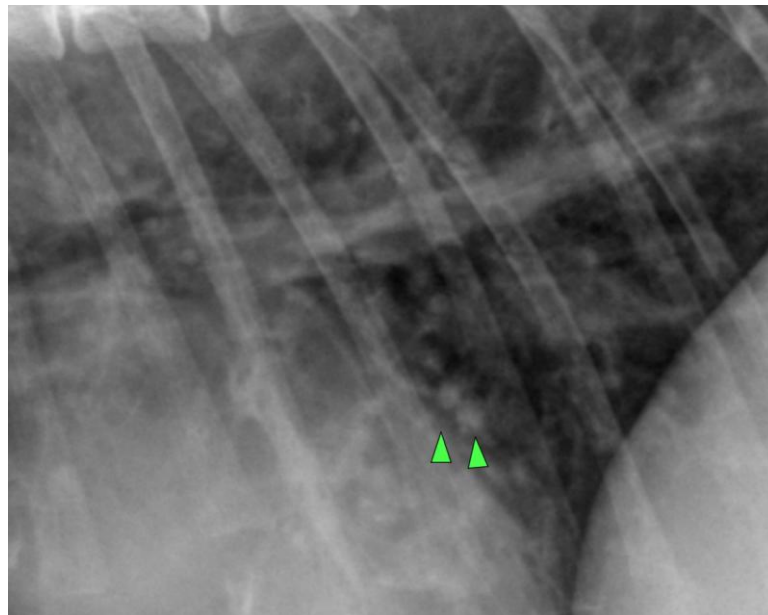
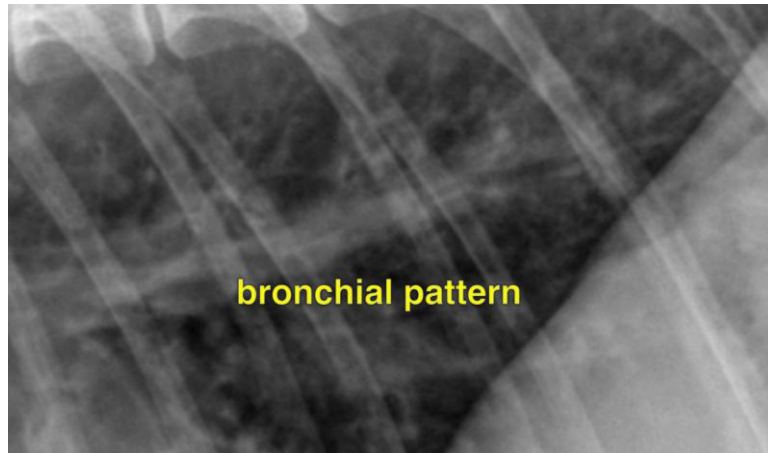
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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