



PATIENT

Beep Gerber

SPECIES

Feline

BREED

DSH

SEX

Male Neutered

AGE

12Y, 19D

WEIGHT

9.8

INTERPRETED BY

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

IMAGING PERFORMED BY

DTLAvets

HOSPITAL NAME

DTLAvets

REFERRING VET

Dr. Castaneda

INVOICE

73953

DATE

2-25-26

PRESENTING CLINICAL SIGNS

always prone to vomit if eats too fast; over the last few weeks P vomiting consistently in the morning after eating breakfast - O is sure to "pace" each meal for the P; then after vomiting P will pass diarrhea in the litter box; 0.5lb weight loss in 1 year; full labs have been submitted today

RADIOGRAPHIC STUDY OF THE THORAX & ABDOMEN

Right/left lateral and ventrodorsal views of the thorax and abdomen totaling 6 images available for review.

RADIOGRAPHIC FINDINGS

Thorax

Adequate inspiratory views.

Mild generalized bronchial lung pattern characterized by subtle bronchial wall thickening is noted. The pulmonary parenchyma is otherwise unremarkable with no focal alveolar interstitial disease identified. No evidence of pulmonary nodules or masses is seen.

The cardiac silhouette is within normal limits. The VHS is 7.0.

The trachea and mediastinum are normal in appearance.

The esophagus is not visible radiographically.

The diaphragm is intact.

Mild spondylosis deformans is present at T6/7.

Abdomen

The serosal detail is within normal limits.

The gastrointestinal tract appears normal in distribution and diameter. No radiographic evidence of obstruction is seen. No discrete mass effect is identified.

The liver and kidneys are within expected radiographic limits for size, opacity, and shape.

The urinary bladder is moderately distended and presents within normal limits.

No evidence of abdominal gas or effusion is seen.

RADIOGRAPHIC DIAGNOSIS

- Mild bronchial lung pattern.
- No radiographic explanation for vomiting and diarrhea identified.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The radiographic study reveals a mild bronchial lung pattern most consistent with chronic inflammatory airway disease such as feline chronic allergic lower airway syndrome and less likely bronchitis. Age related changes or prior lower airway disease are potential differential diagnoses. Further definition is only recommended in case of pertinent clinical signs such as coughing.



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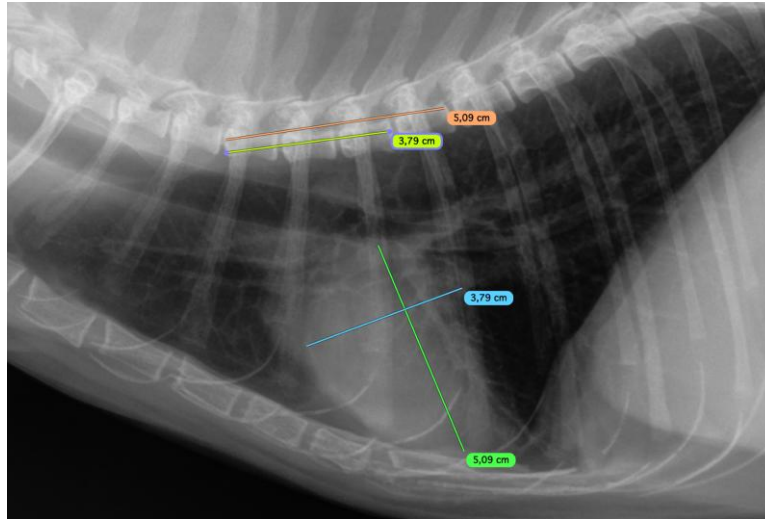
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The radiographic study does not reveal an explanation for vomiting and diarrhea. Radiographs can appear normal in many clinically significant gastrointestinal disorders such as chronic enteropathy, inflammatory bowel disease, pancreatitis, functional or motility disorders, subileus, and other. Ultrasound is recommended as the next diagnostic step to evaluate for causes that are radiographically occult, specifically to assess gastrointestinal wall layering, thickness, motility, mesenteric lymph nodes, pancreas, hepatobiliary system, and gastric outflow.



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.

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