



PATIENT	PRESENTING CLINICAL SIGNS
Aiden DeMetrios	Increased renal values
SPECIES	Abnormal PE/Chem/CBC/UA Results: Attached BW
Canine	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
Samoyed	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.
SEX	Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and adequate corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left and right retroperitoneal spaces were sonographically unremarkable without evidence of inflammatory criteria or free fluid. The left kidney measured 6.0 cm in length. The right kidney measured 6.3 cm in length.
MN	The area of the aortic trifurcation was free of pathology.
AGE	The area of the residual prostate appeared normal and free of pathology.
3yr	Adrenal Glands
WEIGHT	The left and right adrenal glands were not definitively visualized. No obvious pathology was present in the area of the bilateral adrenal glands.
78	Spleen
INTERPRETED BY	The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Liver/Gallbladder
IMAGING PERFORMED BY	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
Dr. Steele	Gastrointestinal
HOSPITAL NAME	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild non-shadowing ingesta with no signs of ileus, obstruction or foreign material.
Loving Care VH	The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.
REFERRING VET	Normal visible colon wall layers were present with apparent formed feces in lumen.
Dr. Steele	Pancreas
INVOICE	
12945ag	
DATE	
02/13/2023	



PATIENT

Aiden DeMetrios

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

SPECIES

Canine

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

BREED

Samoyed

ULTRASONOGRAPHIC FINDINGS

- Sonographically unremarkable kidneys-suspect potential acute nephropathy or renal injury
- Normal urinary bladder

SEX

MN

Sonographically the appearance of the kidneys exhibiting normal renal size, corticomedullary architecture and adequate corticomedullary border demarcation is suggestive of potential acute nephropathy or renal injury. No evidence of congenital dysplasia or renal changes suggestive of chronic nephropathy present. Potential infectious disease or toxin exposure could be considered.

AGE

3yr

Correlation with a full urinary workup including C/S and baseline UPC level is suggested. A resting cortisol level to rule out occult Addison's disease is recommended.

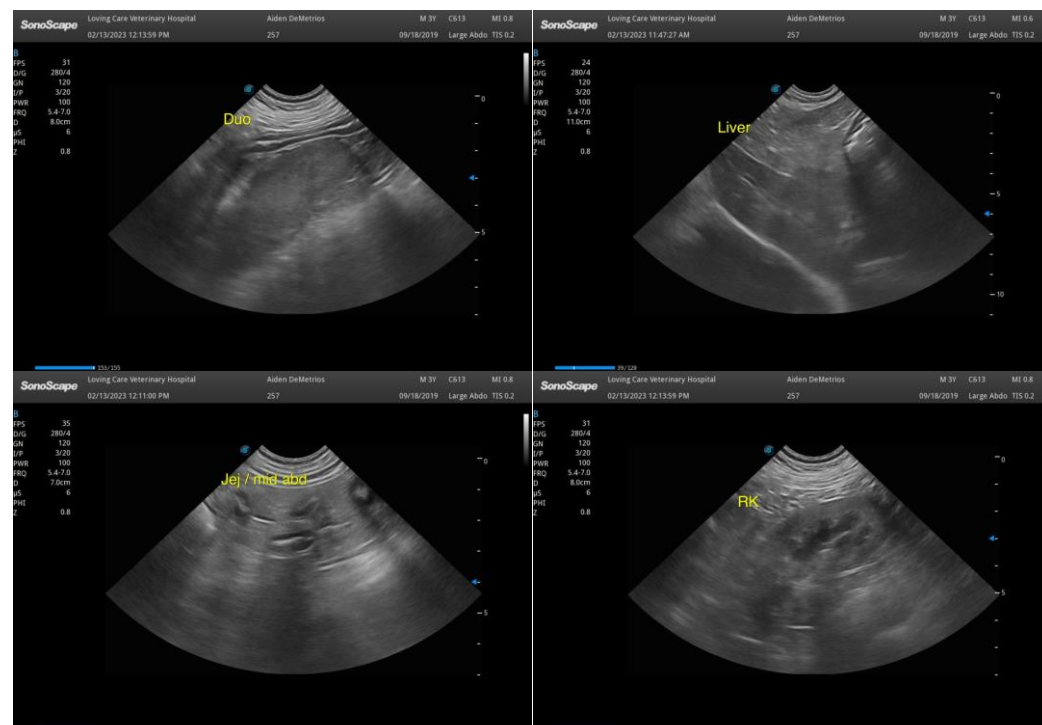
WEIGHT

78

As needed renal support pending further urinary work up with potential sonographic reassessment if persistent/progressive azotemia is recommended.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)



IMAGING PERFORMED BY

Dr. Steele

HOSPITAL NAME

Loving Care VH

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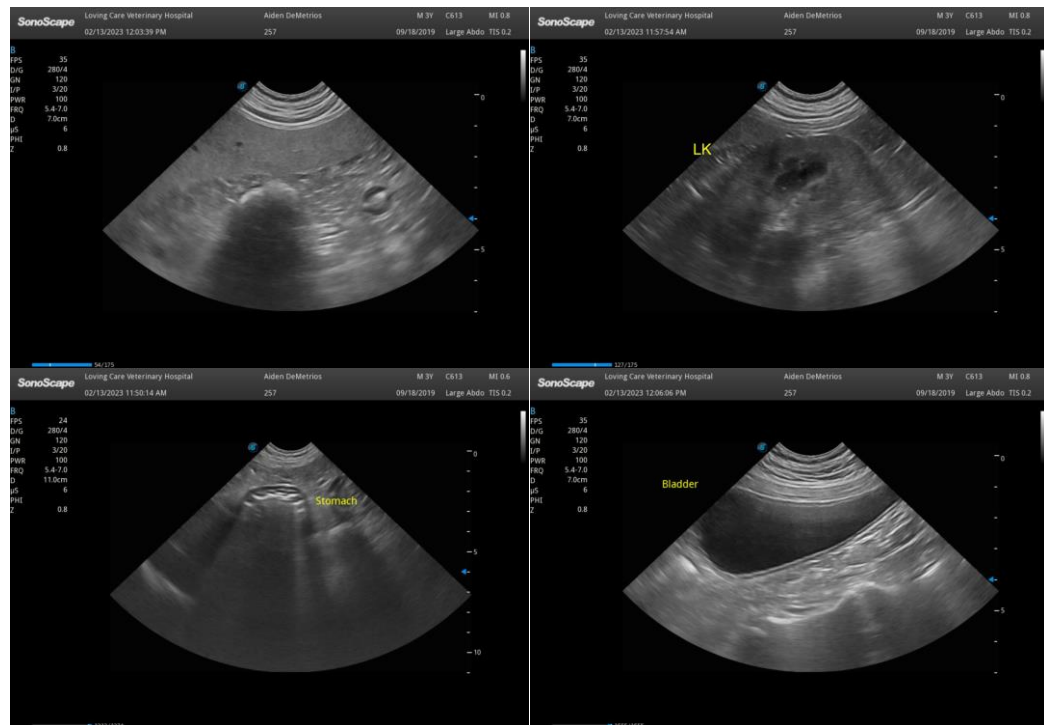
Dr. Steele

INVOICE

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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.

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
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