



PATIENT	PRESENTING CLINICAL SIGNS
Kumi Nelson	Lethargic, not eating, pale mm
SPECIES	CBC-RBC 5.3, HCT 32.6, MCV 61.5, MCHC 28.6, WBC 27.8 with neutrophilia and monocytosis
Canine	Unremarkable Chemistry Panel, Globulin 5.6
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Akita	Urinary System
SEX	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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 was noted.
FI	
AGE	
6 years	No evidence of pathology was noted in the area of the uterus or bilateral ovaries.
WEIGHT	Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal 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 kidney measured 8.0 cm in length. The right kidney measured 8.2 cm in length.
97 lbs.	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.7 cm length x 0.72 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.1 cm length x 0.73 cm width at the caudal pole.
IMAGING PERFORMED BY	Spleen
Sara Hansen	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.
HOSPITAL NAME	Liver/ Gallbladder
Countryside AC	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 mild gallbladder debris, likely incidental secondary to fasting or nonclinical cholestasis. No evidence of a gallbladder mucocele was noted. The cystic and common bile ducts were normal.
REFERRING VET	
Dr. Cox	
INVOICE	
13610	
DATE	
4/5/22	



PATIENT

Gastrointestinal

Kumi Nelson

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained minor retained nonshadowing ingesta / chyme. No overt evidence of shadowing gastric echoes or foreign material was noted.

SPECIES

Canine

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.

BREED

Akita

Normal visible colon wall layers were present with apparent formed feces in lumen.

SEX

FI

Pancreas

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 were evident.

AGE

6 years

Free Abdomen

Focal to intermittent, minor to mildly prominent midabdominal mesenteric nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example lymph node measured 0.68 cm width. No evidence of significant lymphadenopathy, omental masses, or peritoneal effusion was noted.

WEIGHT

97 lbs.

INTERPRETED BY

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

ULTRASONOGRAPHIC FINDINGS

- Overall sonographically unremarkable abdomen
- Mild retained gastric ingesta / chyme
- Intermittent minor to mild subjectively benign / reactive mesenteric lymph nodes - likely incidental

IMAGING PERFORMED BY

Sara Hansen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Countryside AC

Overall, no overt evidence of significant visceral pathology as an obvious or definitive cause of the patient's clinical signs or nonregenerative anemia.

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Further assessment may include; CBC pathology review, infectious / vector disease panel if clinically indicated, +/- resting cortisol. Potentially bone marrow analysis may be indicated in this patient.

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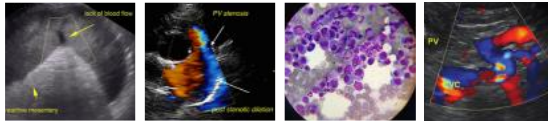
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For an additional charge, internal medicine consult can be utilized through SonoPath.com. You can select the internal medicine drop down at <http://spa.sonopath.com/>.

DATE

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One of the world's top internists & SonoPath associate Dr. Remo Lobetti BVSc, MMedVet, PhD, DECVIM can evaluate your case through SonoPath. <https://sonopath.com/resources/sonopath-services/internal-medicine-teleconsultation-services>



PATIENT

Kumi Nelson

SPECIES

Canine

BREED

Akita

SEX

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HOSPITAL NAME

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REFERRING VET

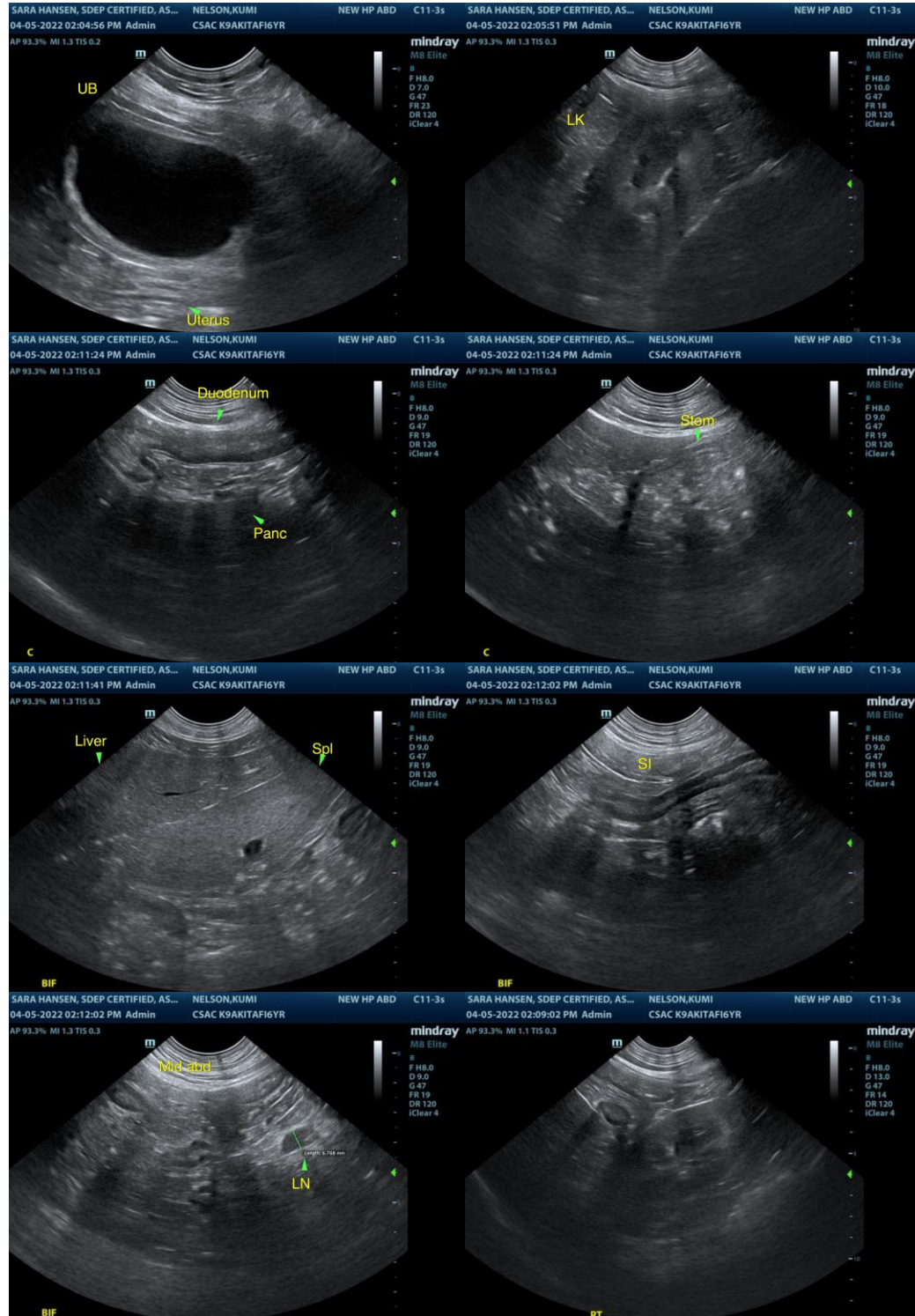
Dr. Cox

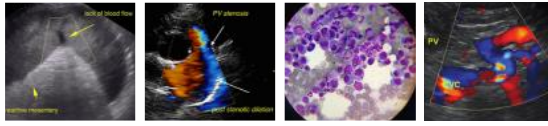
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PATIENT

Kumi Nelson

SPECIES

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Akita

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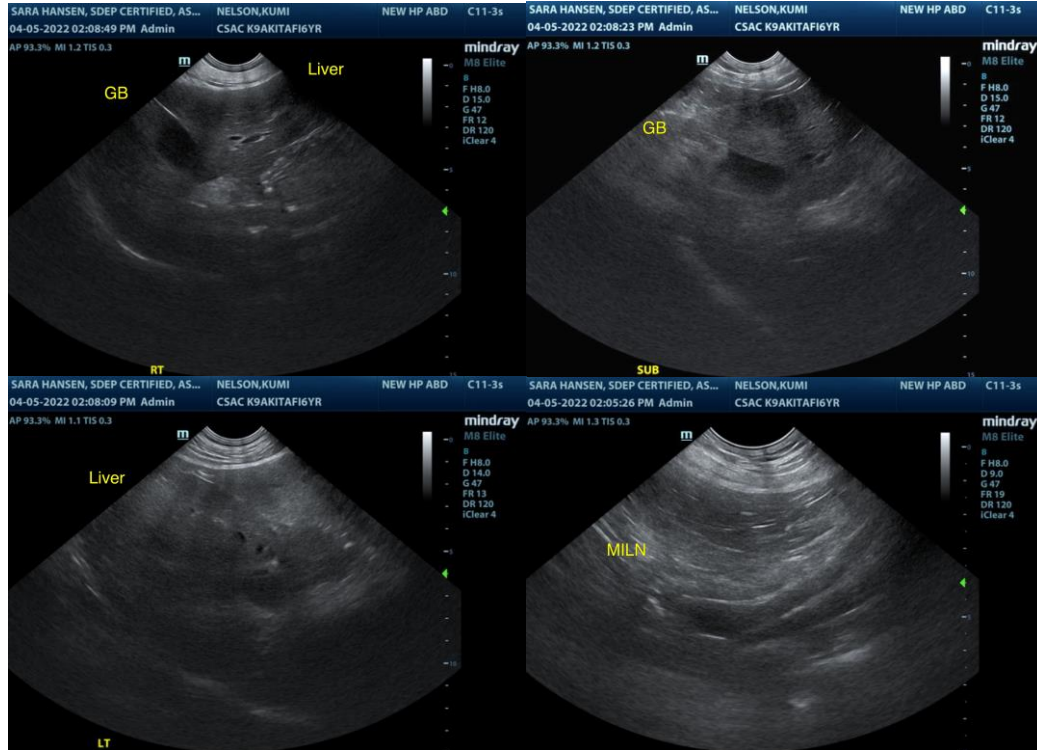
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IMAGING PERFORMED BY

Sara Hansen

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.

HOSPITAL NAME

Countryside AC

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

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Dr. Cox

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