



PATIENT

Jon Snow Hampton-Waugh

SPECIES

Canine

BREED

Husky

SEX

Neutered male

AGE

3 years

WEIGHT

62 lbs

INTERPRETED BY

Remo Lobetti, BVSc,
MMedVet (Med),
PhD, Dipl. ECVIM

IMAGING PERFORMED BY

Danielle Shemanski,
DVM, MA

HOSPITAL NAME

Western New York
Veterinary Service

REFERRING VET

Dr. Salama

INVOICE

74100

DATE

4/2/26

PRESENTING CLINICAL SIGNS

- RDVM REASON FOR REFERRAL: - Jon Snow has experienced two major bouts of vomiting and diarrhea. The first occurred in February, involving bloody emesis and severe, bloody diarrhea, initially diagnosed as potential hemorrhagic gastroenteritis (HGE). He required sedation for evaluation at ARK Urgent Care; while labs and CPLI were normal, he improved following treatment with Cerenia, metronidazole, Pro-Pectalin, and Panacur. Owners suspected sodium chloride (road salt) toxicity and implemented paw-wiping and muzzling. A second similar episode occurred this week involving seven bouts of vomiting and dry heaving, treated with the same protocol. He is heartworm negative after prior treatment. Radiographs previously showed thickened intestinal tracts, likely related to past malnutrition. He burps and hiccups occasionally and does not ingest sticks or rabbit feces. He does have a history of being anaplasma +
- MEDICATIONS: - Simparica Trio
- - He is currently on Provable, a psyllium powder probiotic, and was on Omeprazole twice a day after the last GI episode.
- - Pre-visit medications today: Gabapentin 600 mg and Trazodone 100 mg, given 3 hours prior to appointment.
- - Was also given 0.7ml Torb for the procedure
- Mar 17, 2026 LAB 4Dx Plus Anaplasma phagocytophilum/platys POSITIVE Feb 5, 2026 CBC Retic 9.3 (Ref 10-110 K/uL) LOW CBC was abnormal in that there was no stress leukogram. - Lymphocytes: 14,610/uL (within normal limits) - Neutrophils: 5,230/uL (low normal) - Monocytes: 540/uL (within normal limits) - Eosinophils: 1,650/uL (high) Jan 31, 2026 CBC Plt 126 (Ref 148-484 K/uL) LOW

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is small with a normal thickness and smooth appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

Normal appearance of the trigone area, proximal urethra, and iliac blood vessels.

Normal appearance and size of the iliac lymph nodes. Ureters not visualized, which can be considered a normal finding.

Normal renal size (left measured 6.7 cm, right measured 7.2 cm), architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident. Normal color flow pattern is evident in both kidneys.

The prostate is small and hypoechogenic measuring 1.3 cm in width.

Adrenal Glands

The adrenal glands are bilaterally small and mildly flattened, but maintained a normal echogenic appearance, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 2.37 cm in length x 0.46 cm and 0.5 cm in width. The right adrenal gland measured 2.37 cm in length x 0.47 cm and 0.38 cm in width.



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Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma and regular curvilinear capsule. Normal volume of the splenic vasculature without any overt congestion or thrombosis evident. No inflammatory, neoplastic, infarction, or infiltrative changes evident. The spleen measured 2.5 cm in width.

Liver

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Normal appearance of the hepatic and portal vasculature.

Gallbladder

The gallbladder is full containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct.

Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, 1:3 muscularis to mucosa ratio, normal wall thickness and peristaltic activity, and no distension of the lumen.

Pancreas

The visible sections of the pancreas are of normal size and echogenic appearance with a regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

Normal mesenteric lymph nodes.

No ascites evident.

Thorax

Normal appearance of the heart. No pericardial or pleural effusion evident.

ULTRASONOGRAPHIC FINDINGS

- Small adrenal glands.



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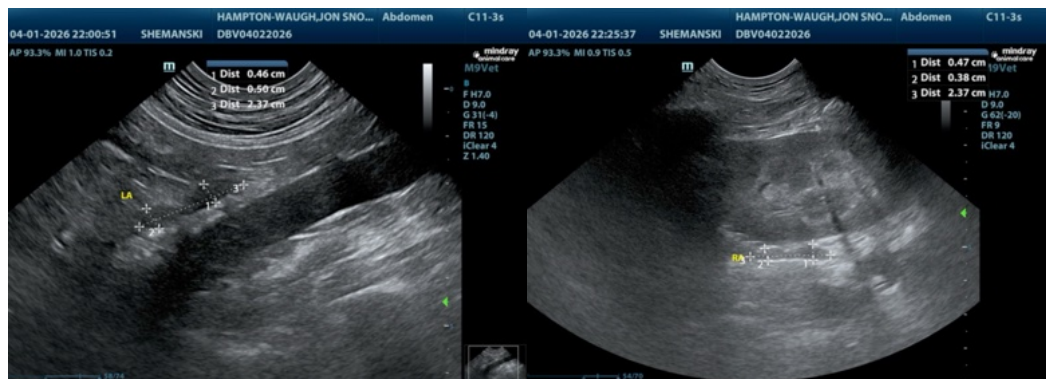
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although the appearance of the adrenal gland may merely be an incidental finding, with the presenting clinical signs and lack of a stress response on the leukogram, atypical Addison's needs to be considered.

Further assessment would be based on the pending results, but could include a basal cortisol and/or an ACTH stimulation test.

Specific therapy would be dependent on an etiological diagnosis.



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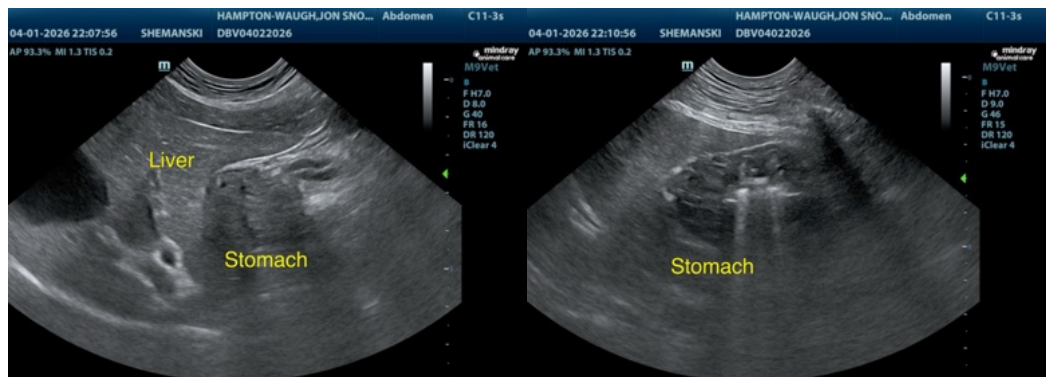
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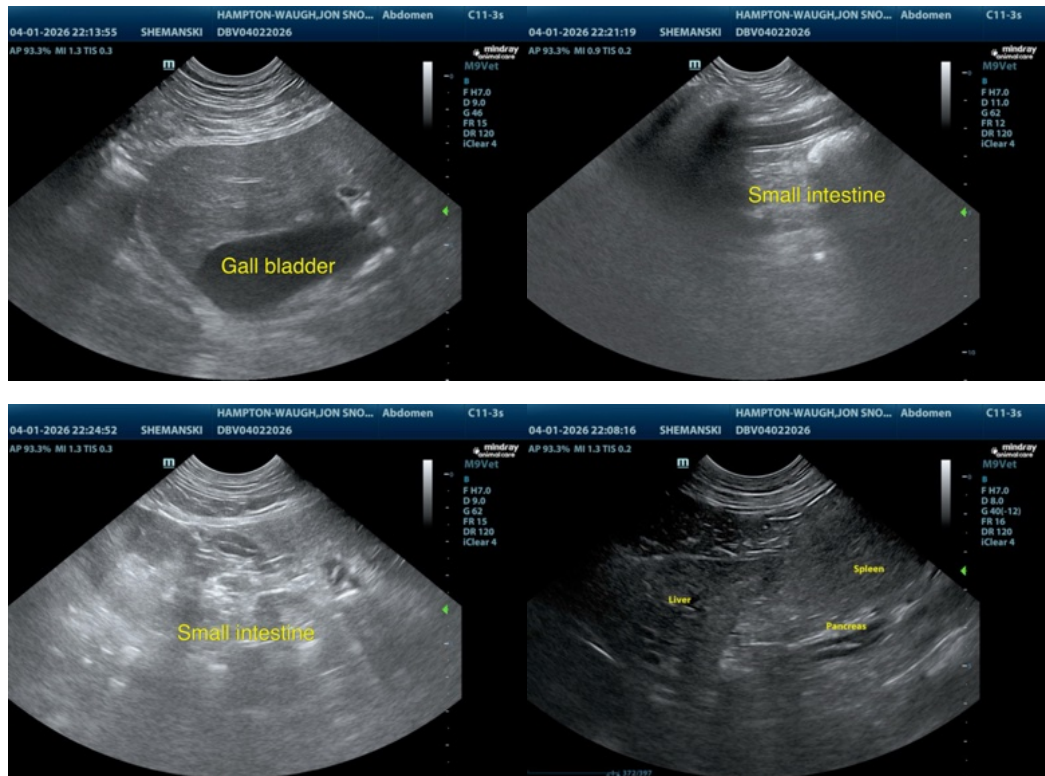
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)

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