



PATIENT

Moose Weisberg

SPECIES

Canine

BREED

Shepherd Mix

SEX

Male

AGE

7 Months

WEIGHT

44 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Danielle Shemanski
DVM, MA

HOSPITAL NAME

Western New York
Veterinary Services

REFERRING VET

Dr. Dan Yanik DVM

INVOICE

13350

DATE

01/22/26

PRESENTING CLINICAL SIGNS

- RDVM REASON FOR REFERRAL: Looking for structural abnormalities. Such as ectopic ureter
- Moose is a 7-month-old male dog presenting for an abdominal ultrasound due to persistent urinary signs and polydipsia (excessive water drinking) since adoption at 2 months of age.
- He exhibits on-and-off diarrhea, urinary urgency, and constant, full-void urination every 5-10 minutes, including full bladder voids on his bed, though he is generally able to hold his urine overnight while crated (8 PM to 6 AM).
- His blood work was unremarkable, and he has a history of treated Giardia/Coccidia and an un-rechecked UTI from October.

Abnormal PE/Chem/CBC/UA Results: CBC/ chem unremarkable USG = 1.010

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was mildly distended in size with normal tone. The 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 ureters were not visible which is normal. No evidence of inflammatory or neoplastic change were noted. Color flow doppler assessment of the ureteral papilla confirmed ureteral jet and correct anatomic location.

The area of the residual prostate appeared normal and free of pathology measuring 1.0 cm in diameter.

Normal size and margination was 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 6.1 cm in length. The right kidney measured 6.0 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.52 cm width at the caudal pole.

No obvious pathology in the area of the right adrenal gland.

Spleen

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.

Liver & Gallbladder

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.



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The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained variably echogenic, mild nonshadowing ingesta. No evidence of obstruction to pyloric outflow.

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.

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

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 was evident.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

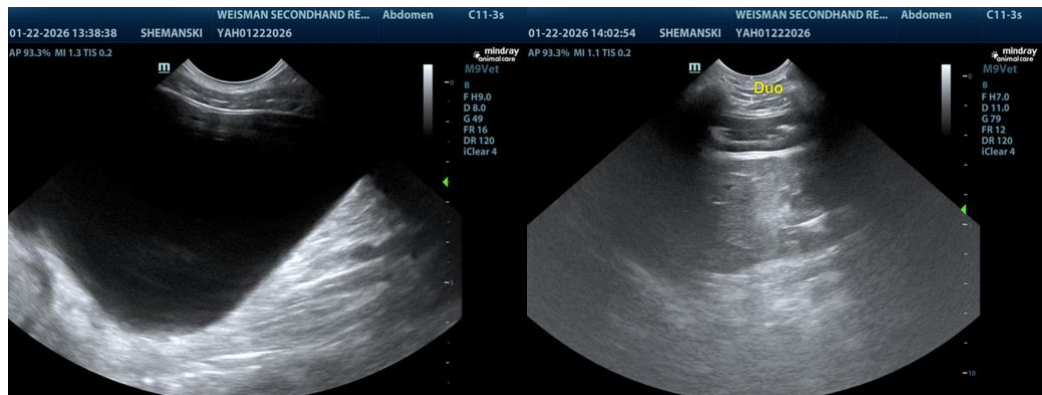
ULTRASONOGRAPHIC FINDINGS

- Sonographically normal urinary bladder, residual prostate and visible proximal urethra.
- Normal gastrointestinal tract with mild nonshadowing gastric ingesta- consistent with food/chyme echogenicity.
- Normal bilateral kidneys.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of upper or lower urinary tract structural or congenital pathology. Recheck urine culture and sensitivity given recent UTI may be considered, although no evidence of urine sediment.

Dietary trial and high colony count probiotic may prove beneficial if recurrent gastrointestinal signs. Screening cortisol level may be considered given reported polydipsia and intermittent gastrointestinal signs.





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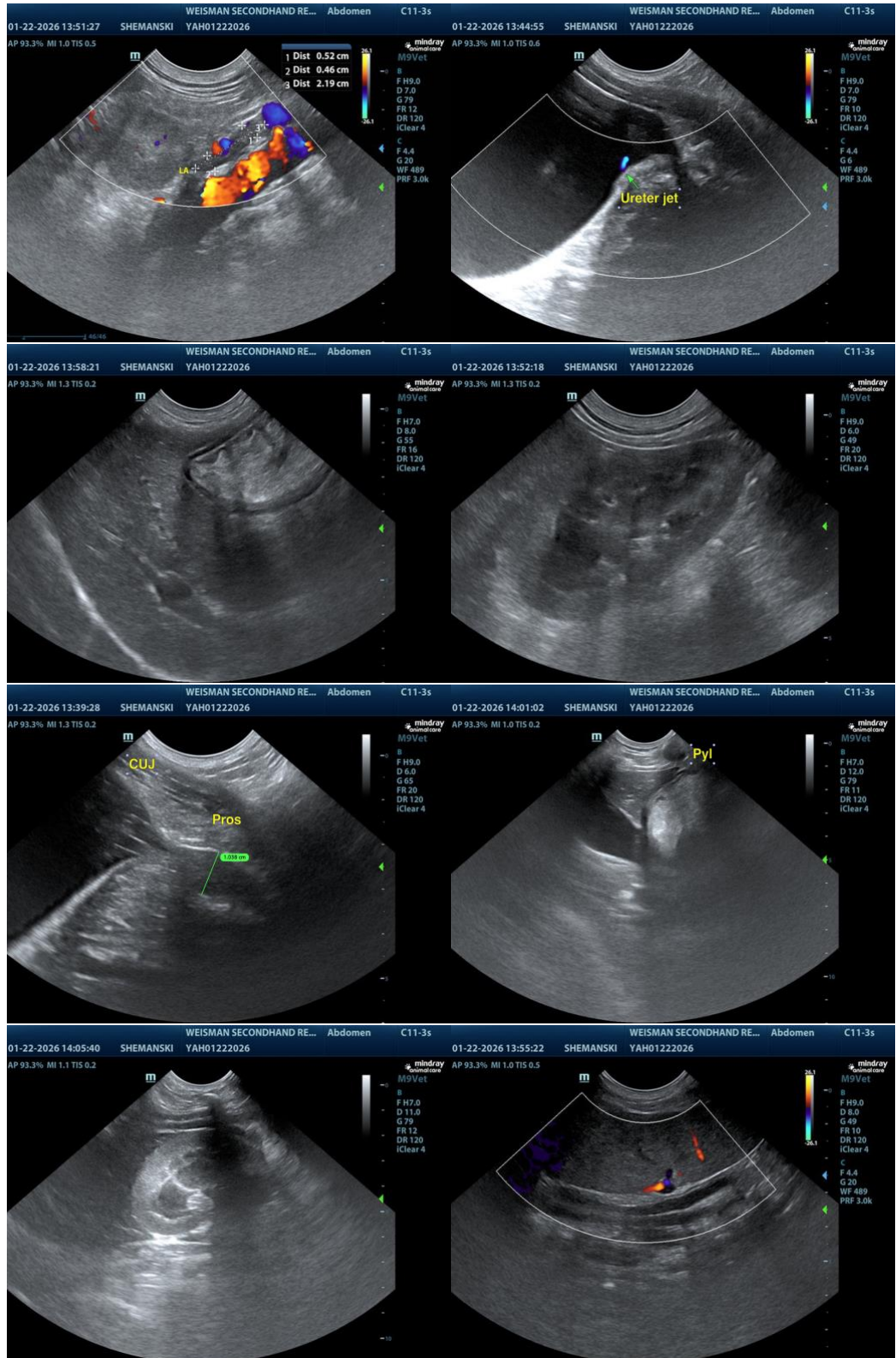
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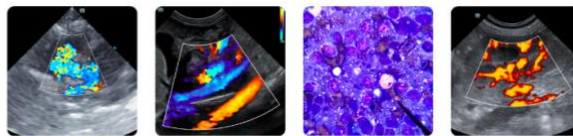
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

info@SonoPath.com