**PATIENT**

Denver Miller

SPECIES

Canine

BREEDGerman Shepherd
Husky Mix**SEX**

Neutered Male

AGE

11.5

WEIGHT

88

INTERPRETED BYR. McKenzie Daniel,
DVM, DABVP**IMAGING
PERFORMED BY**

Dr. Rachel Sangl

HOSPITAL NAMEThe Ark Veterinary
Clinic**REFERRING VET**

Dr. Rachel Sangl

INVOICE

12131

DATE

11/06/25

PRESENTING CLINICAL SIGNS

Owner reports that p has been acting off the last year or so. p has been shivering when temps get below 60 degrees. This is abnormal since he used to sleep in snow/ice and not be phased. p also seems to be losing his hearing. At first o thought it was selective hearing but realized p won't wake up anymore when talking or vocalizing loudly at him. She's been needing to touch him. o also feels p just looks sad at times. He is just being different and slow.

Abnormal PE/Chem/CBC/UA Results: HCT: 38% on 9/9/25 and 10/28/25. 42% on 11/6/25 ALP: Been slowly increasing from 266 on 3/18/24 to 372 on 10/28/25 Reticulocytes: 17 on 10/28/25 RBC: 5.51 Hemoglobin: 13.8 Platelets: 458 AST: 15

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

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 change were noted.

The residual prostate was sonographically normal.

The area of the aortic trifurcation was free of pathology.

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 7.5 cm in length. The right kidney measured 7.6 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 0.80 cm width at the caudal pole.

The right adrenal gland was not definitively visualized owing to adrenal depth and patient's size. 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

The liver presented borderline to mild enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen



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in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion.

The gallbladder was non distended in size with mild nonorganized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

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

- Benign hepatopathy pattern- suggestive of vacuolar or nonobstructive cholestatic hepatopathy
- Mild gallbladder debris (non-mucocele).
- Normal spleen.
- Age-related renal changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, sonographically unremarkable to mild geriatric abdomen without evidence of significant visceral pathology. A definitive cause of the clinical signs in this patient was not obvious. Hepatosupportive medications may prove beneficial. No evidence of abdominal neoplastic criteria.



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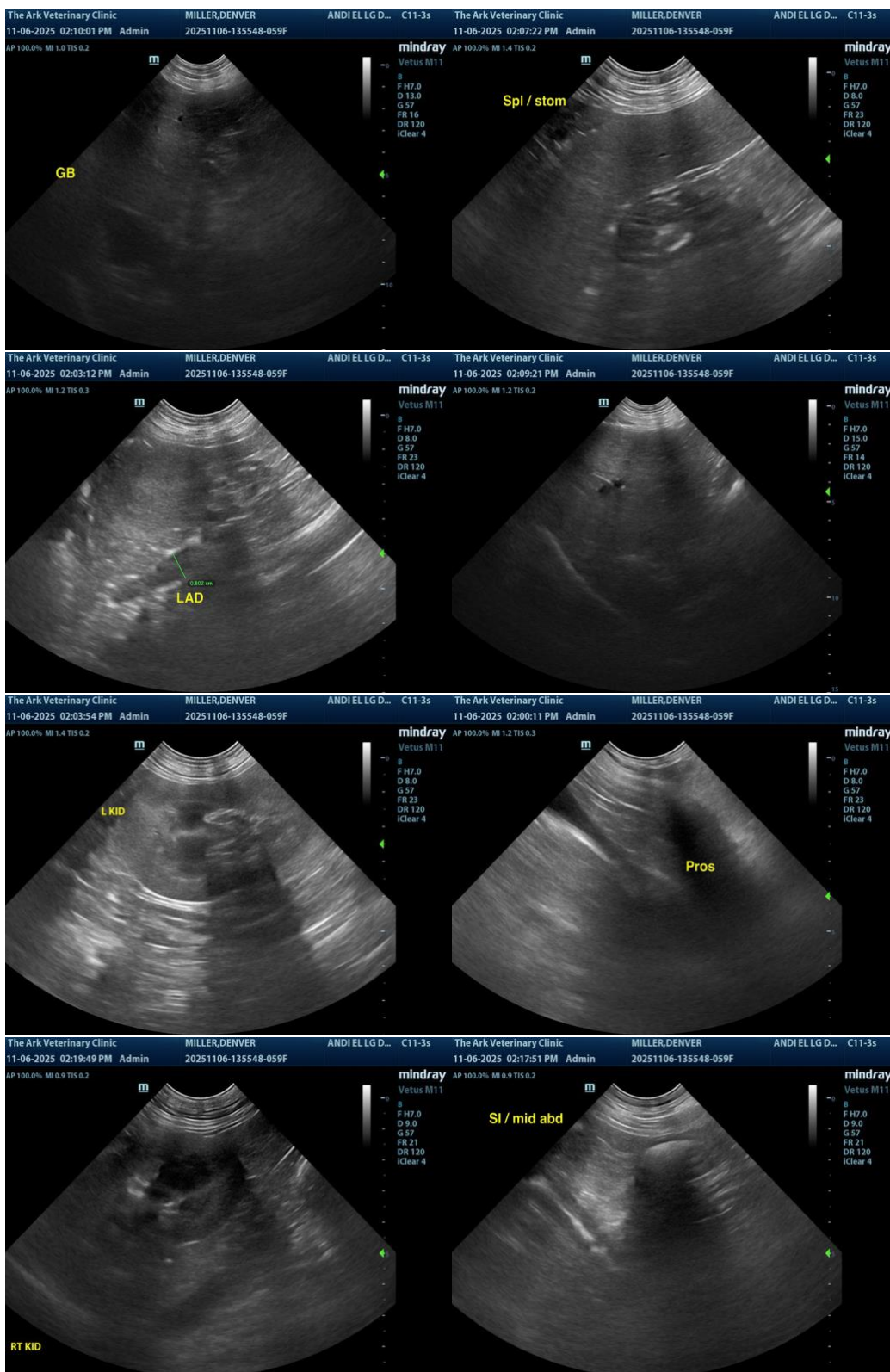
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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