



PATIENT

Soul Maclean

SPECIES

Canine

BREED

Doberman

SEX

Male Intact

AGE

7

WEIGHT

32 kgs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Goeres

HOSPITAL NAME

Kelowna VH

REFERRING VET

Dr. Lavroff

INVOICE

13179

DATE

2/6/26

PRESENTING CLINICAL SIGNS

History:

- Gradually increasing ALT in last 3 months. first noted when presented for diarrhea.
- Meds: Currently on Zentonil
- Clinically normal now
- Daily chronic supplements include Mobility, green-lipped mussel, ESM, gut guard, turkey tail, kibble fixer, heart well-being support. Recent addition of berry supplement for antioxidants

Abnormal PE/Chem/CBC/UA Results: ALT 360 Jan 30, 2026, ALP and alb WNL CBC WNL ALT 223 Jan 10, 2026, USG at that time was 1.015, inactive sediment, no crystals Hx of spondylosis

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment, mineral or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

The prostate was enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic without parenchymal mineralization. The prostate measured ~5.0 cm in diameter. Solitary visualized, small, non-capsule deforming anechoic, thinly walled parenchyma cysts were present.

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 7.5 cm in length. The right kidney measured 7.4 cm in length.

Adrenal Glands

The area of the left and right adrenal glands was free of overt pathology although adrenal were not definitively visualized.

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 exhibited possible borderline enlargement in size with normal vascular volume. 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



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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 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.

PRIMARY FINDINGS

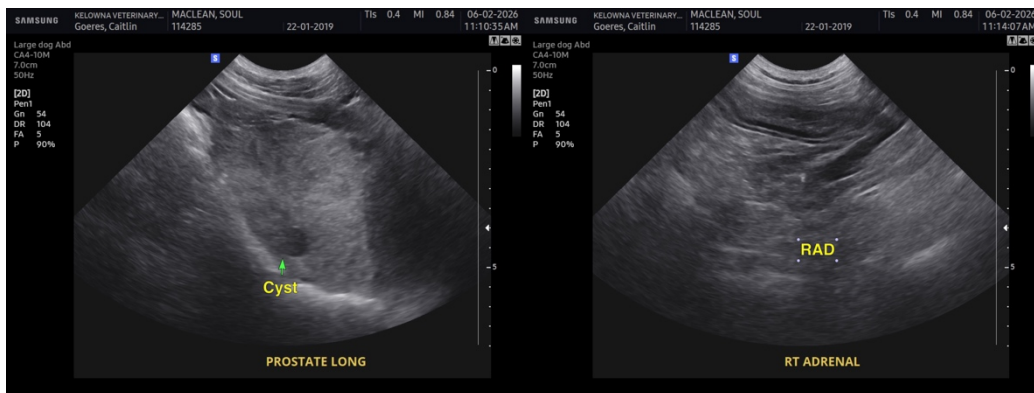
- Hepatopathy – consistent with benign hepatopathy criteria
- Normal gallbladder

SECONDARY FINDINGS

- Benign prostatic hyperplasia with small prostatic cysts

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Correlation with pending hepatic sampling to assess for nonspecific hepatic inflammatory disease or hepatotoxicosis, i.e. copper as primary differentials given ALT elevation. No evidence of intrahepatic or extrahepatic macroscopic shunt. Continued hepato-supportive medications would be reasonable pending histopathology. No evidence of prostatic inflammation or neoplasia.





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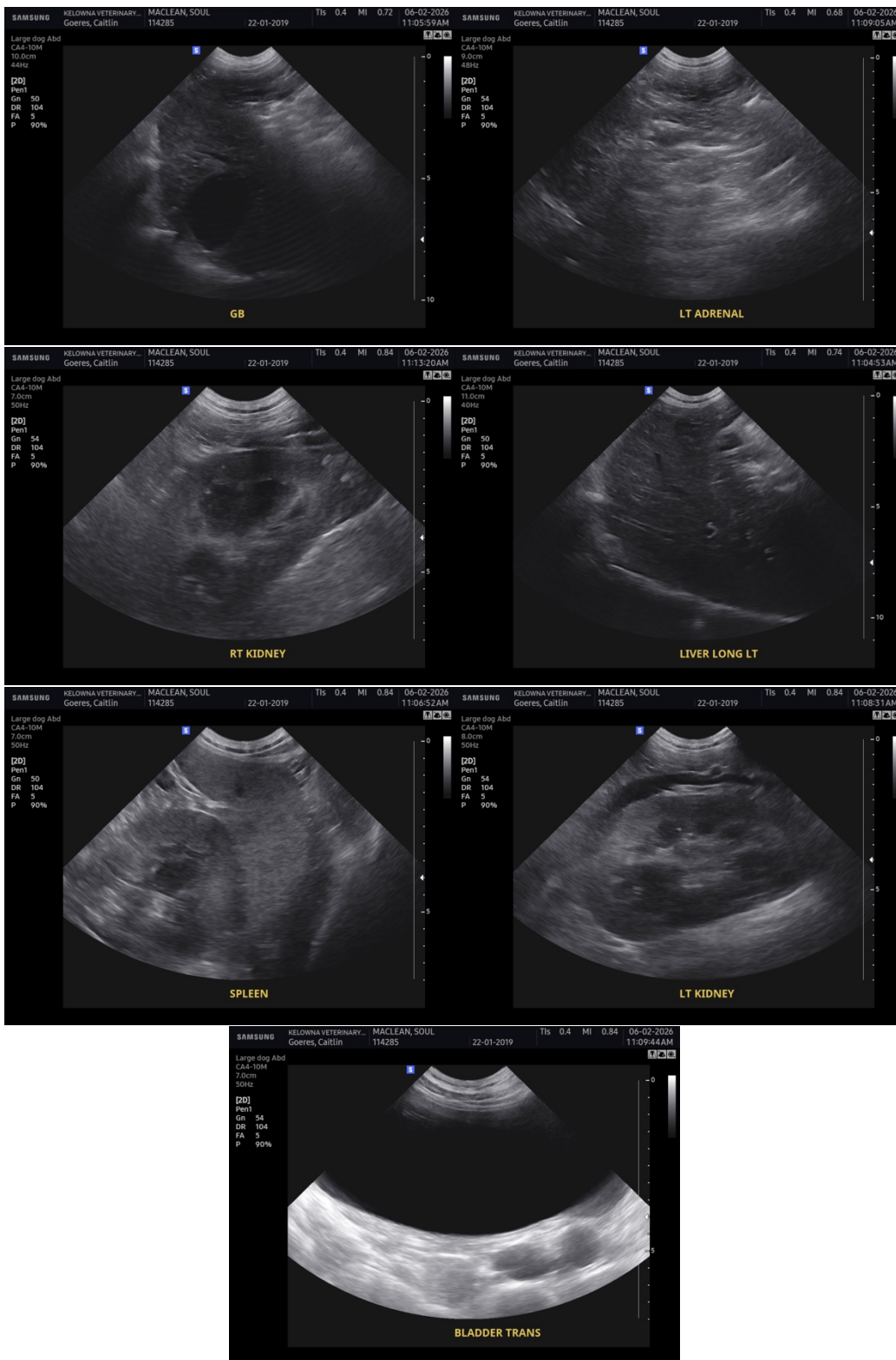
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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