



**PATIENT**

Peppa Campbell

**SPECIES**

Canine

**BREED**

Min Pin

**SEX**

Spayed Female

**AGE**

10 Years

**WEIGHT**

12.7 Pounds

**INTERPRETED BY**

Brittany Sinclair DVM,  
 DACVECC

**IMAGING PERFORMED BY**

Amanda Stewart

**HOSPITAL NAME**

Smithville AH

**REFERRING VET**

Dr. Chauhan

**INVOICE**

35951

**DATE**

2/24/26

**PRESENTING CLINICAL SIGNS**

- Vomited bile a few times yesterday
- Significant decrease in appetite and drinking more since yesterday
- Onset intermittent weakness in hind end
- Vomited while in clinic brown liquid
- Abnormal PE/Chem/CBC/UA Results: SOFT TISSUE OPACITY SEEN IN THE CRANIAL ABDOMEN IN THE REGION OF LIVER AND SPLEEN AND ALSO THERE IS A F.B. PATTERN SEEN IN S.I. ALONG WITH A RADIODENSE STRUCTURE IN THE MID ABDOMEN.
- Primary Question to Be Answered in This Exam: Confirming if it is a foreign body or tumor in abdomen?

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

***Urinary System***

The urinary bladder, trigone, and visible pelvic urethra were of normal thickness. The ureters were not visible which is normal. There was normal wall layering with no masses, uroliths or abnormal thickening visualized. Urine was anechoic. No evidence of inflammatory or neoplastic changes were noted.

The kidneys were both normal size and structure, with smooth capsule and normal corticomedullary definition and ratio. Medullary structure differed distinctly from that of the cortex. No evidence of pelvic dilation was present. The left kidney measured 3.91 cm in length. The right kidney measured 4.57 cm in length.

***Adrenal Glands***

Both adrenal glands were visualized and recognized as having normal shape, size, position and echogenicity for this breed and age. The visible phrenic vasculature was unremarkable. The left adrenal gland measured 1.9 cm in length and 0.54 cm at the caudal pole and 0.55 cm at the cranial pole. The right adrenal gland measured 1.95 cm in length and 0.48 cm at the caudal pole and 0.99 cm at the cranial pole.

***Spleen***

The spleen was normal with age-appropriate homogeneous parenchyma and a smooth capsule with normal splenic vasculature with no signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarct changes were noted.

***Liver***

The liver is subjectively normal in size with normal contours and structure. There is age-appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion.

Gall bladder is moderately distended with normal wall thickness and anechoic contents. Common bile duct is non-distended and tapers normally.



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***Gastrointestinal***

The stomach is significantly distended with anechoic fluid. It measures at a normal thickness of with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate. No masses or focal lesions were observed.

The visible duodenum is mild to moderately fluid distended with some back-and-forth motion seen. Multiple loops of jejunum have mild fluid distention. There is one loop that is nondistended but contains a small object with complete acoustic drop out, most consistent with foreign material. There is a small intestinal loop that is more moderately distended with an abnormal nonshadowing cylindrical object within the lumen, concerning for a nonshadowing foreign material. Just aborad to this cylindrical structure, there is definitive curvilinear shadowing material, consistent with foreign material. Aborad to the shadowing foreign material, small intestine becomes nondistended with normal wall thickness and layering.

The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

***Pancreas***

The pancreas is not distinctly visualized.

***Lymph Nodes***

No clinically significant lymphadenopathy or abnormalities noted.

***Free Abdomen***

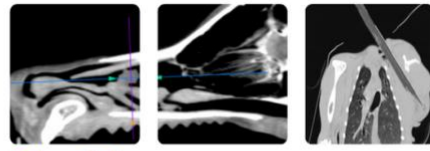
No masses or free fluid were noted.

**ULTRASONOGRAPHIC FINDINGS**

- Obstructive small intestinal foreign body – suspect jejunal

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The area marked questionable for possible mass appears to be an obstructive jejunal foreign body. Abdominal explore is strongly recommended.



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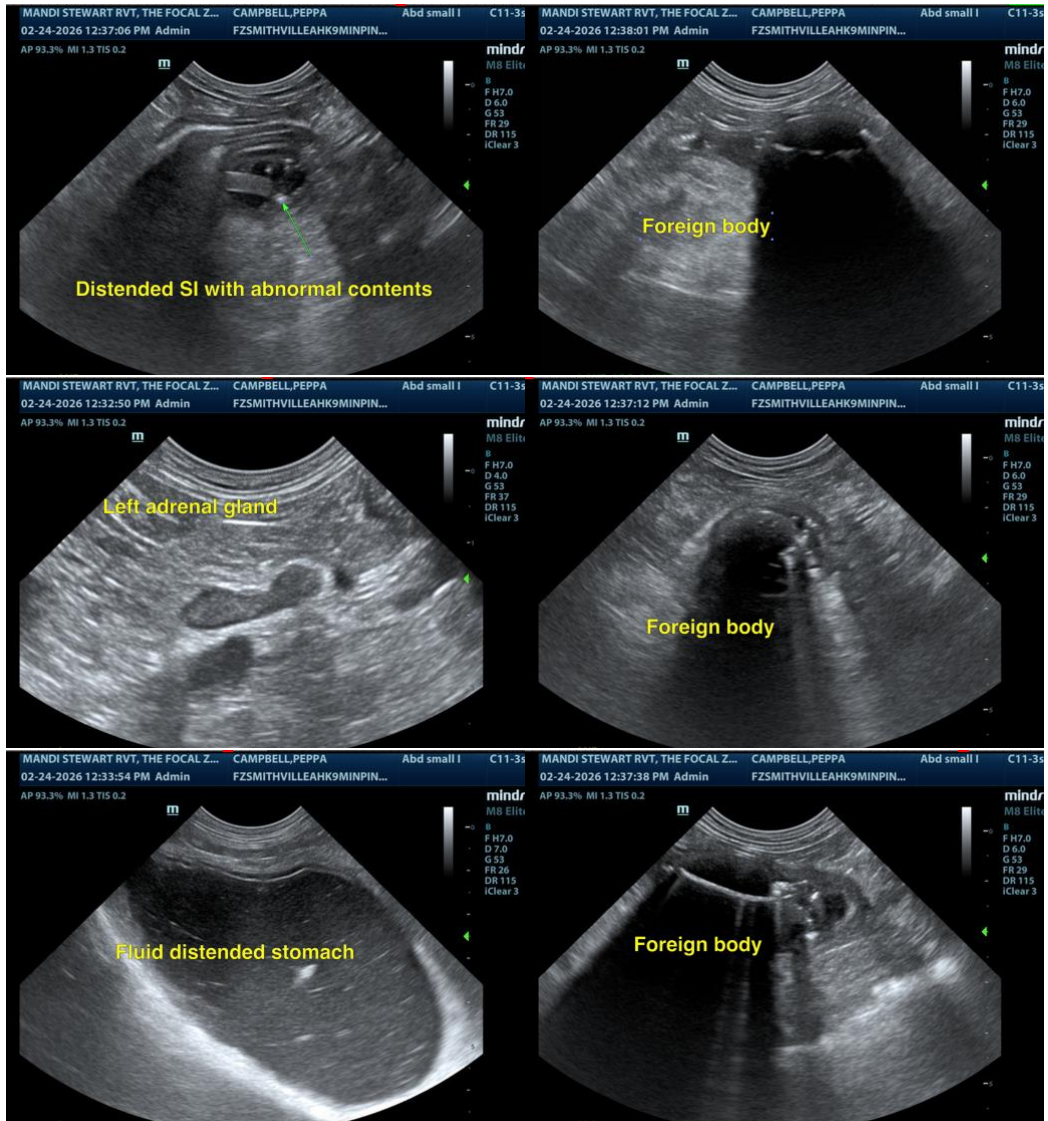
Dr. Chauhan

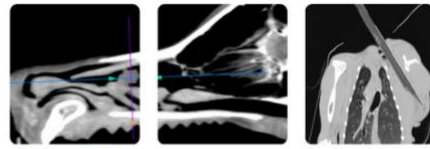
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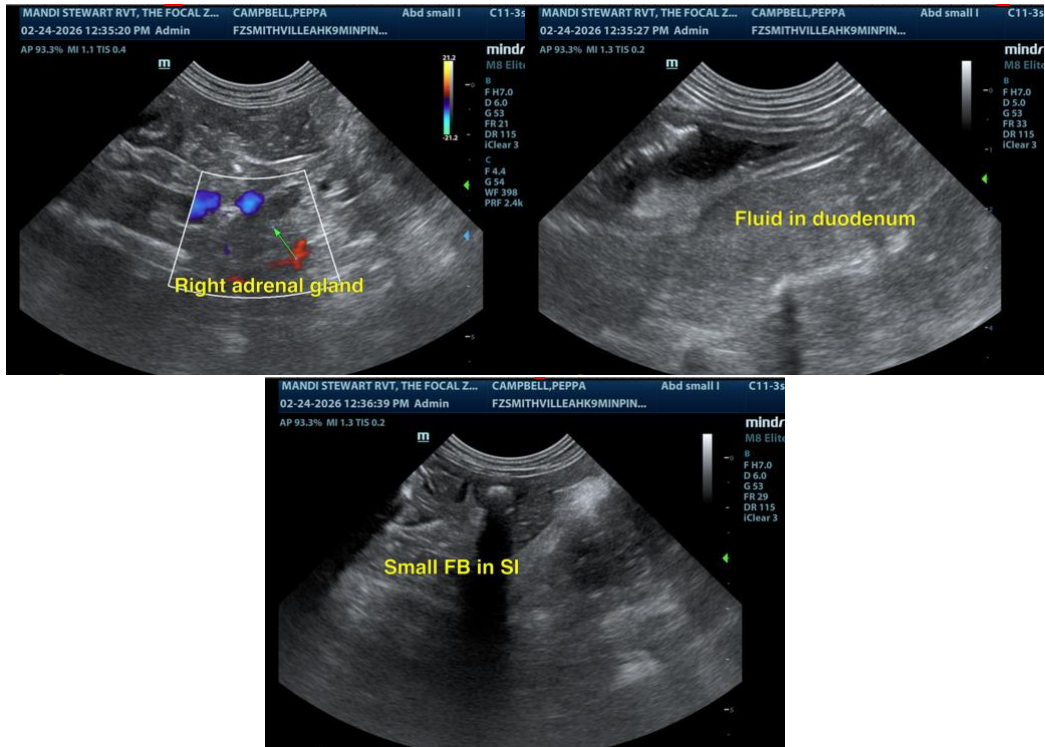
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Dr Brittany Sinclair, BVSc(hons), DACVECC  
 info@SonoPath.com