



PATIENT

Maisy Villella

SPECIES

Canine

BREED

Cockapoo

SEX

Spayed Female

AGE

2 Years

WEIGHT

7.7 kg

INTERPRETED BY

Dr Brittany Sinclair,
 BVSc(hons),
 DACVECC

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

St. Catharine's Animal
 Hospital

REFERRING VET

Dr. Collado-Torres

INVOICE

75426

DATE

5/26/26

PRESENTING CLINICAL SIGNS

Presented for acute vomiting (5 times since early morning). First three episodes contained food while the last two were smaller in volume. Owner concerned about a foreign body as patient has history of ingestion of underwear requiring enterotomy in Jan 2026. Owner worried because rads at that time were not suggestive of FB even though there ended up being one present. Last meal for Maisy was yesterday at 5 pm. Has been given Emavert injection.

Abnormal PE/Chem/CBC/UA Results: Rads - Significant fecal matter is visible within the colon, soft in appearance. - Content noted on small bowels, ingesta vs FB. - Suspected content on stomach, ingesta vs FB. A classic radiographic pattern of gastrointestinal obstruction is not present at this time; no irregular gas pockets, no plication noted. A foreign body cannot be ruled out based on these images.

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. Left kidney measured 4.08 cm.

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. Right measures 1.44 cm in length x 0.50 cm at the caudal pole and 0.41 cm at the cranial pole. Left measures 1.26 cm in length x 0.48 cm at the caudal pole and 0.52 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.

Gastrointestinal

The stomach contains minimal luminal contents. 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.



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The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal luminal contents with a small amount of gas shadowing and no distention. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. There were no focal lesions consistent with obstruction or a mass effect observed.

There is shadowing visible within the colon, which may represent foreign material or fecal material. There is no observed focal or generalized colon wall thickening or loss of layering.

Pancreas

The visible pancreas was observed to be largely isoechoic to surrounding omental fat.

Free Abdomen

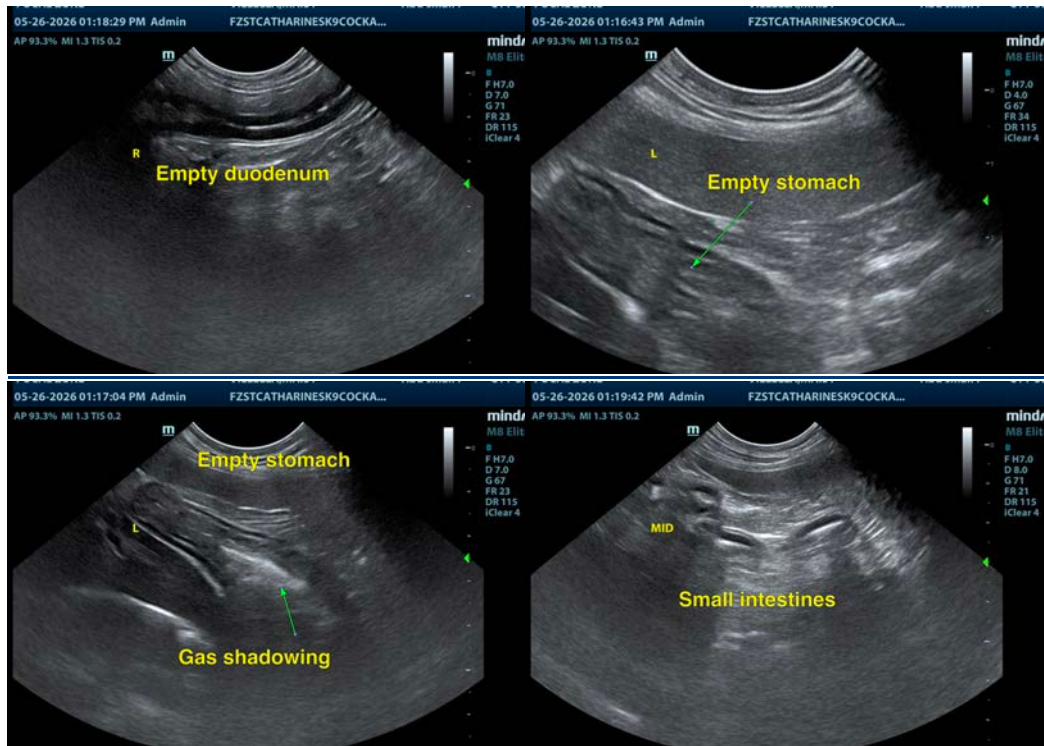
No clinically significant lymphadenopathy or abnormalities noted. No free fluid noted.

ULTRASONOGRAPHIC FINDINGS

- Unremarkable abdomen, no evidence of obstruction or foreign material.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is no visible foreign material on abdominal ultrasound and no signs of obstruction. There is shadowing within the colon, which may represent normal fecal material or foreign material that should pass normally. Treatment for acute gastroenteritis is reasonable with plan for recheck imaging.





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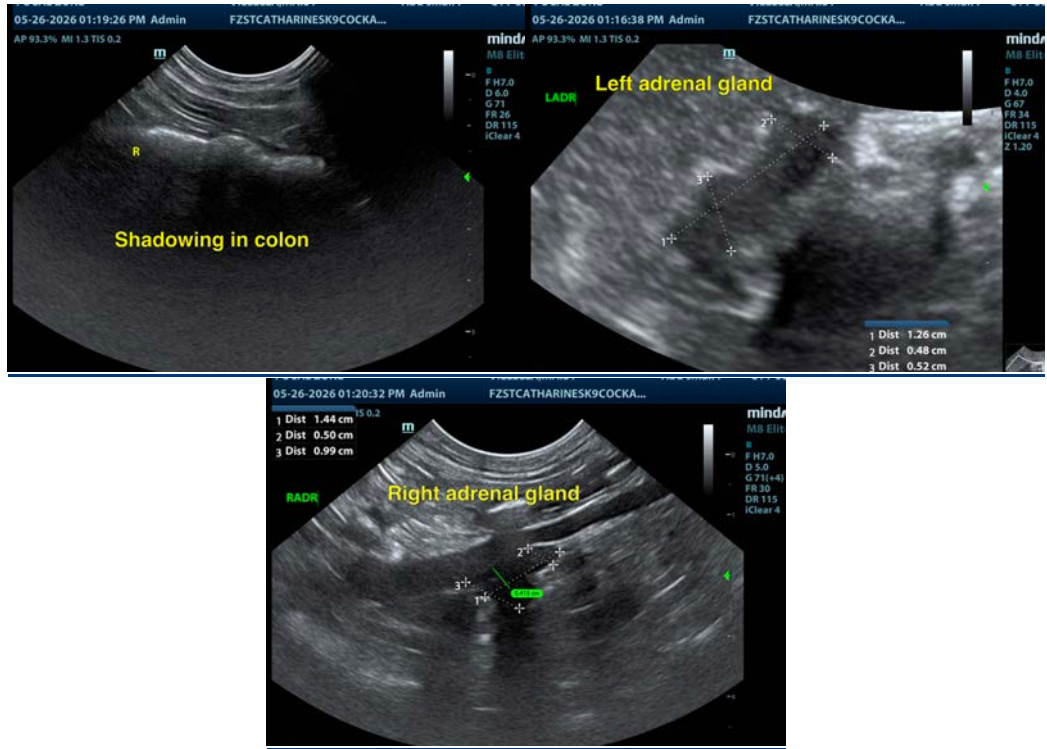
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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