



**PATIENT**

Maddie Yarenis

**SPECIES**

Canine

**BREED**

Golden Doodle

**SEX**

Spayed Female

**AGE**

11 Years

**WEIGHT**

23 lbs

**INTERPRETED BY**

Eric Lindquist, DMV,  
DABVP (CFM), Cert.  
IVUSS

**IMAGING PERFORMED BY**

Rebecca Hamilton

**HOSPITAL NAME**

Park Ridge Animal  
Hospital

**REFERRING VET**

Dr. Doyle

**INVOICE**

72608

**DATE**

1/30/26

**PRESENTING CLINICAL SIGNS**

Vomiting, not eating past several days. Mostly will vomit at night. Not responding to supportive care. Radiographs showed gastric material

Meds: Pepcid 10mg BID, Apoquel 5.4 mg SID PRN

Abnormal PE/Chem/CBC/UA Results: Lipase 441 (H) ALP324 (H) radiographs show gastric foreign material +/- or food no evidence of SI obstruction

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes were noted. Ureteral papillae were normal. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Right kidney measured 4.68 cm. Left kidney measured 4.43 cm.

**Adrenal Glands**

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. Left measured 2.15 cm x 0.46 cm at the cranial pole and 0.62 cm at the caudal pole. Right measured 1.92 cm x 0.91 cm at the cranial pole and 0.62 cm at the caudal pole.

**Spleen**

The **spleen** was folded upon itself. It presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

**Liver**

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.



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**Gastrointestinal**

The **stomach** was filled with shadowing gastric material that continued into the upper duodenum. The echotexture of the gastric material would be consistent with fabric type foreign body or similar. A thickened portion of upper intestine with luminal foreign body revealed reactive mesentery, which is concerning for potential dehiscence. The colon was empty.

**Pancreas**

The **pancreas** was hypoechoic and irregular with undulating contour. Some level of pancreatitis likely yet changes were fairly mild.

**ULTRASONOGRAPHIC FINDINGS**

- Gastrointestinal foreign body.
- Concurrent pancreatic remodeling, potential low-grade pancreatitis.
- Age related renal and hepatic changes.
- Folded spleen.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Immediate gastrointestinal surgical intervention recommended. GI biopsies warranted to rule out underlying disease. Carpeting, fabric or similar material suspected.





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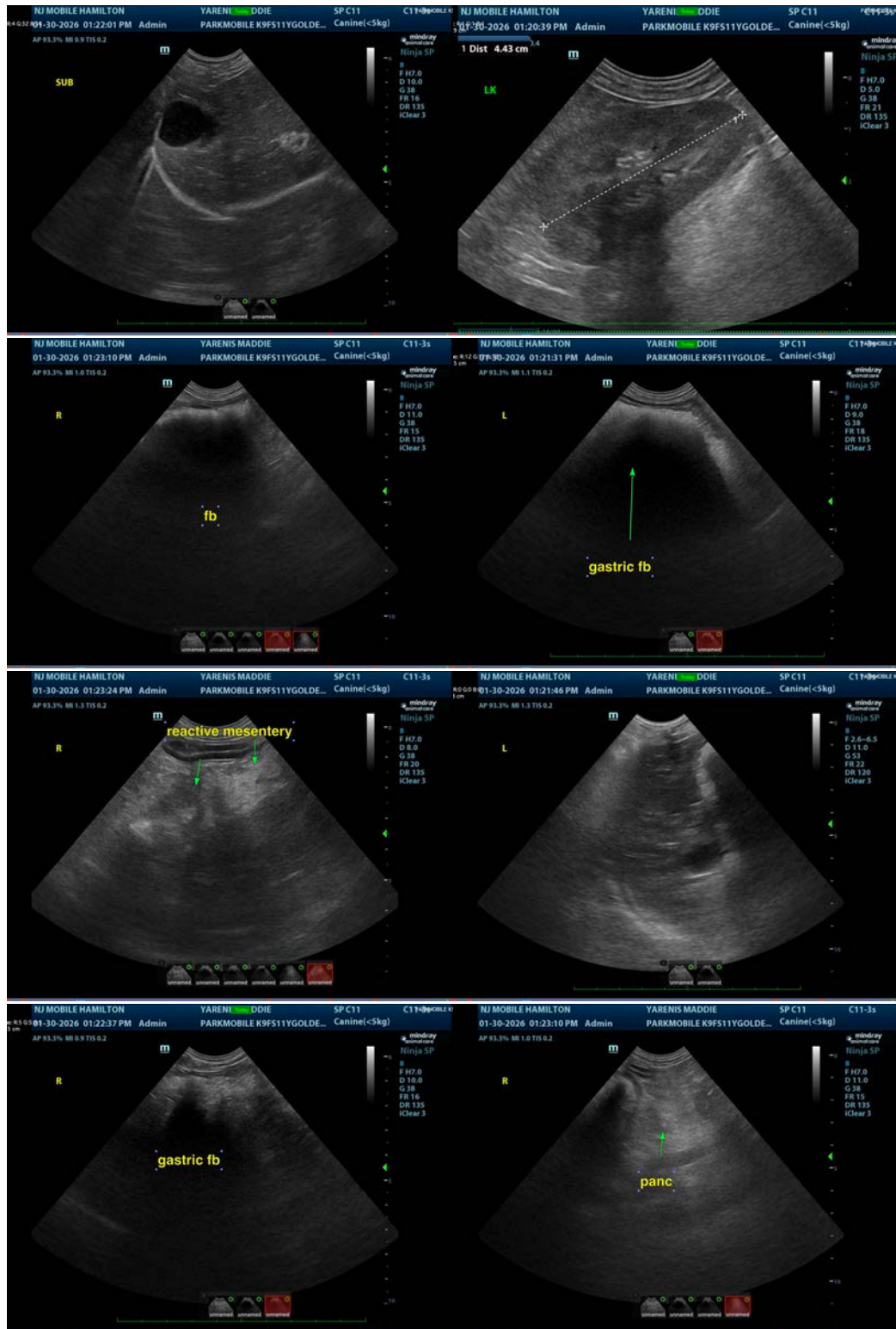
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Eric Lindquist**, DMV, DABVP(CFM), Cert. IVUSS,  
CEO, Owner, Founder -- SonoPath.com  
[info@SonoPath.com](mailto:info@SonoPath.com)