



DATE PRESENTING CLINICAL SIGNS

12/16/25

Patient History: The patient, Tucker, presented for evaluation of VOMITING. The owner reports the patient VOMITED APPROXIMATELY 15 TIMES OVERNIGHT, beginning on the evening of December 15, 2025. The vomitus initially contained food but has since progressed to only bile. The owner notes a history of the patient ingesting a rug. Appetite: Drinking: Vomiting: YES, 15 TIMES OVERNIGHT. Diarrhea: Regular Diet: Coughing: Sneezing: Activity Level : Energetic at home. Lifestyle: Exposure to Ticks: Current Medications: Flea/Tick Prevention: Heartworm Prevention: History of vaccine reactions or medication reactions: Client Concerns: The owner is concerned about the patient's persistent vomiting.

PATIENT

Tucker Garcia

SPECIES

Canine

Current Medications: Butorphanol, Acepromazine.

Labwork Results: Labwork attached.

BREED

Golden Retriever

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed by: Rachel Brillhart, RDMS.

SEX

Intact Male

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.

12/16/20

WEIGHT

90 lbs

The prostate was uniform at 3.66 cm.

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. Right kidney measured 6.5 cm. Left kidney measured 7.4 cm.

HOSPITAL NAME

Animal Emergency
Hospital

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 3.18 cm x 0.66 cm at the caudal pole and 0.51 cm at the cranial pole. Right measured 3.19 cm x 0.68 cm at the cranial pole and 0.55 cm at the caudal pole.

REFERRING VET

Dr. Kalinowski

Spleen

The **spleen** was mildly enlarged and folded upon itself caudally.

INVOICE

72621

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

Gastrointestinal

The **stomach** was repleted, with shadowing material consistent with foreign body accumulation. Gastric wall thickening and hypertrophy noted in the pyloric outflow. Pyloric wall thickness measured up to 1.4 cm with some loss of mural detail. The distal small intestine revealed shadowing material up to 2.4 cm.

Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

Other

The testicles were imaged and found to be uniform, no evident pathology.

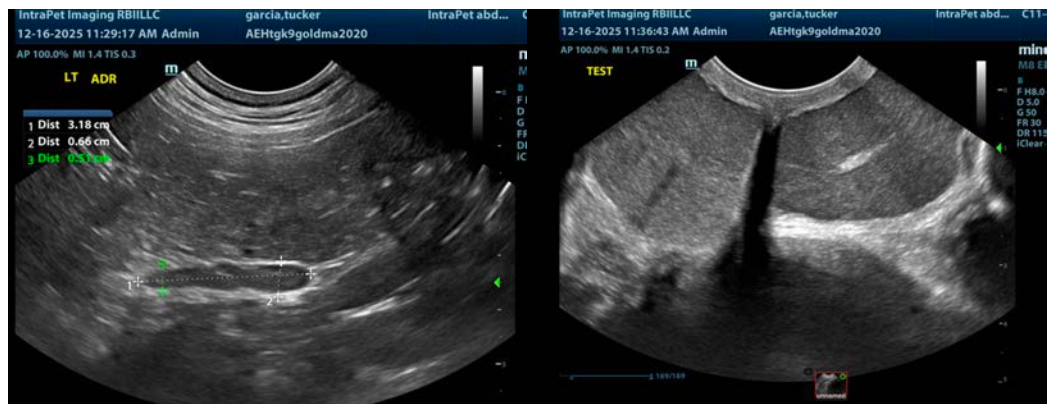
ULTRASONOGRAPHIC FINDINGS

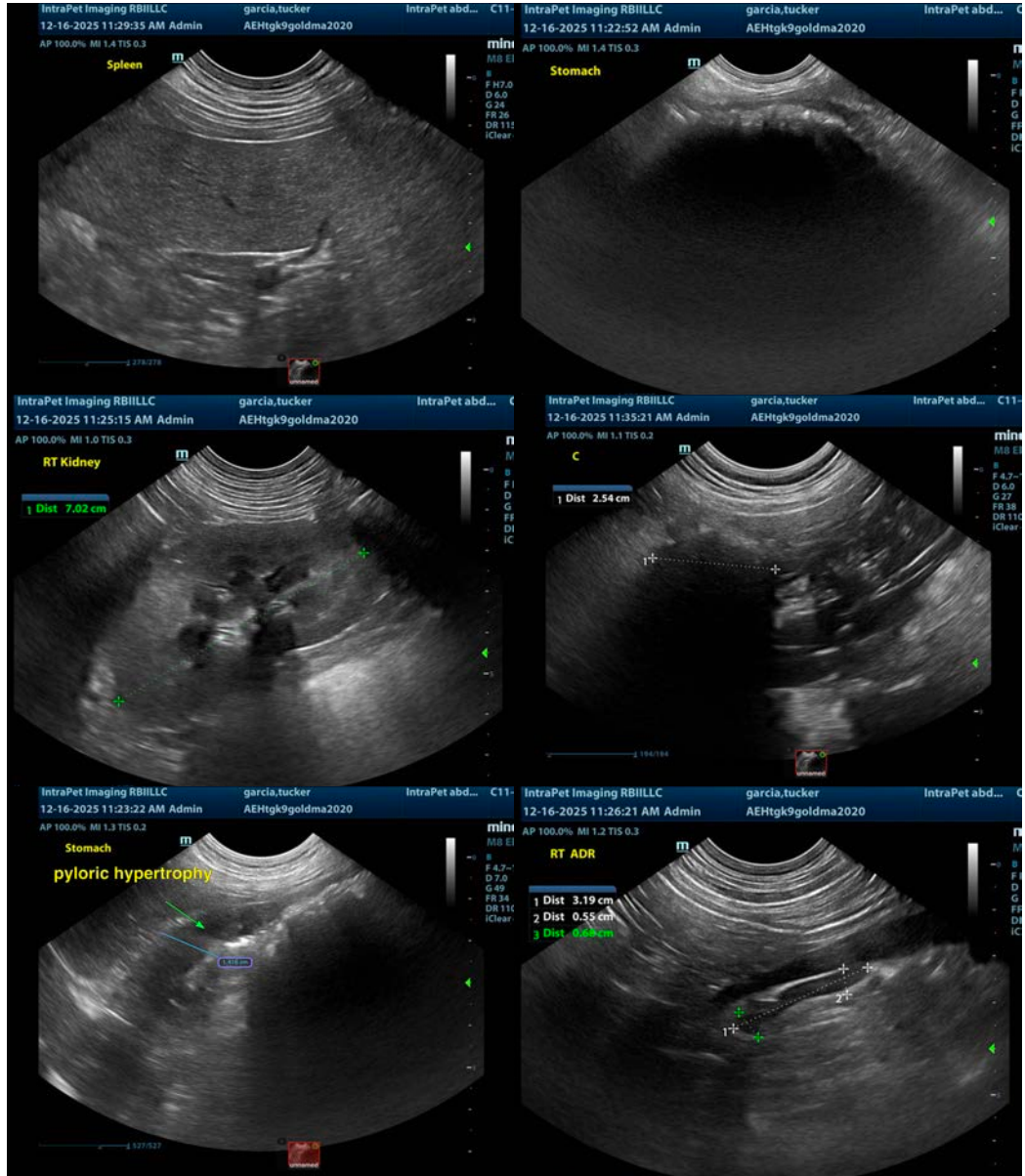
- Gastrointestinal foreign bodies with pyloric hypertrophy.
- Reactive spleen.

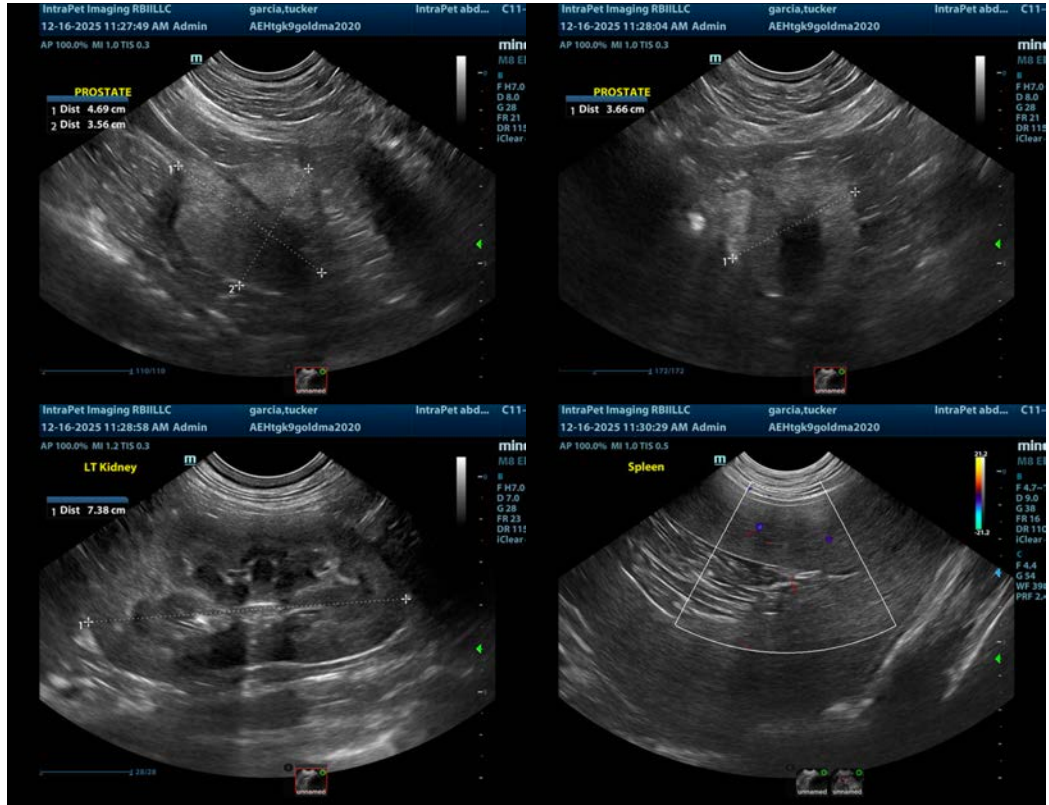
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Gastrotomy, enterotomy, and gastric wall biopsies warranted to assess for underlying disease. I cannot rule out underlying gastric neoplasia. FNA or biopsy of the spleen warranted as well at time of surgery to ensure this is a hyperplastic state.

According to Sonopath research presented at ECVIM 2016 (Stockholm, Sweden), Advances in Small Animal Medicine and Surgery (May 2017), and EVDI 2017 (Verona, Italy), concurrent underlying chronic inflammatory neoplastic intestinal disease can often reside in PICA patients. Therefore, surgical biopsies are essential in this case regardless of the exploratory findings.







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.

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