



DATE PRESENTING CLINICAL SIGNS

03/07/26

Patient History: Stopped eating Wednesday, tried to offer bland diet and was not interested, ingested underwear lining Monday night or Tuesday morning. Tuesday morning - started to vomit and had diarrhea. Wednesday, he started to vomit more. Has not seen it passed in stool or in vomit. Has not inspected all stools. Lethargic, ears pinned back at home.

PATIENT

Scooby Montgomery

Medical History: known to eat things he's not supposed to, frequently eats underwear.
Current diet-Hills Science dry food.

SPECIES

Canine

Current Medications: Zofran, Omeprazole, Provable.
Labwork Results: Labwork not submitted. Reported as Petz R Us 3/5/26 - Radiographs did not show FBO as per O, no blood work performed.

BREED

Husky

Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Requested.
Imaging Performed by: Andi Parkinson, BS, RDMS.

SEX

Neutered Male

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

AGE

12/03/24

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.

WEIGHT

25.5 kg

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. The left kidney measured 7.0 cm in length. The right kidney measured 6.74 cm in length.

INTERPRETED BY

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

Adrenal Glands

Both **adrenal glands** were low normal in width and slightly flattened. The left adrenal gland measured 3.13 cm x 0.43 cm width at the cranial pole and 0.42 cm width at the caudal pole. The right adrenal gland measured 2.77 cm x 0.39 cm width at the cranial pole and 0.49 cm width at the caudal pole.

HOSPITAL NAME

Mason Dixon Animal
Emergency

Spleen

REFERRING VET

Dr. McCarty

The **spleen** 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.

INVOICE

14133

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 over distended with progressively shadowing chyme. The pylorus was patent, however, a 4.0 cm jejunal foreign body was noted medial to the spleen with entrapped chyme followed by empty small intestine. It appears the patient is passing a soft foreign body. It is debatable on whether this will pass (on its own with fluid support or surgical intervention indicated. This may be palpable in the mid abdomen. Reactive mesentery was noted around the obstructed portion of intestine.

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.

ULTRASONOGRAPHIC FINDINGS

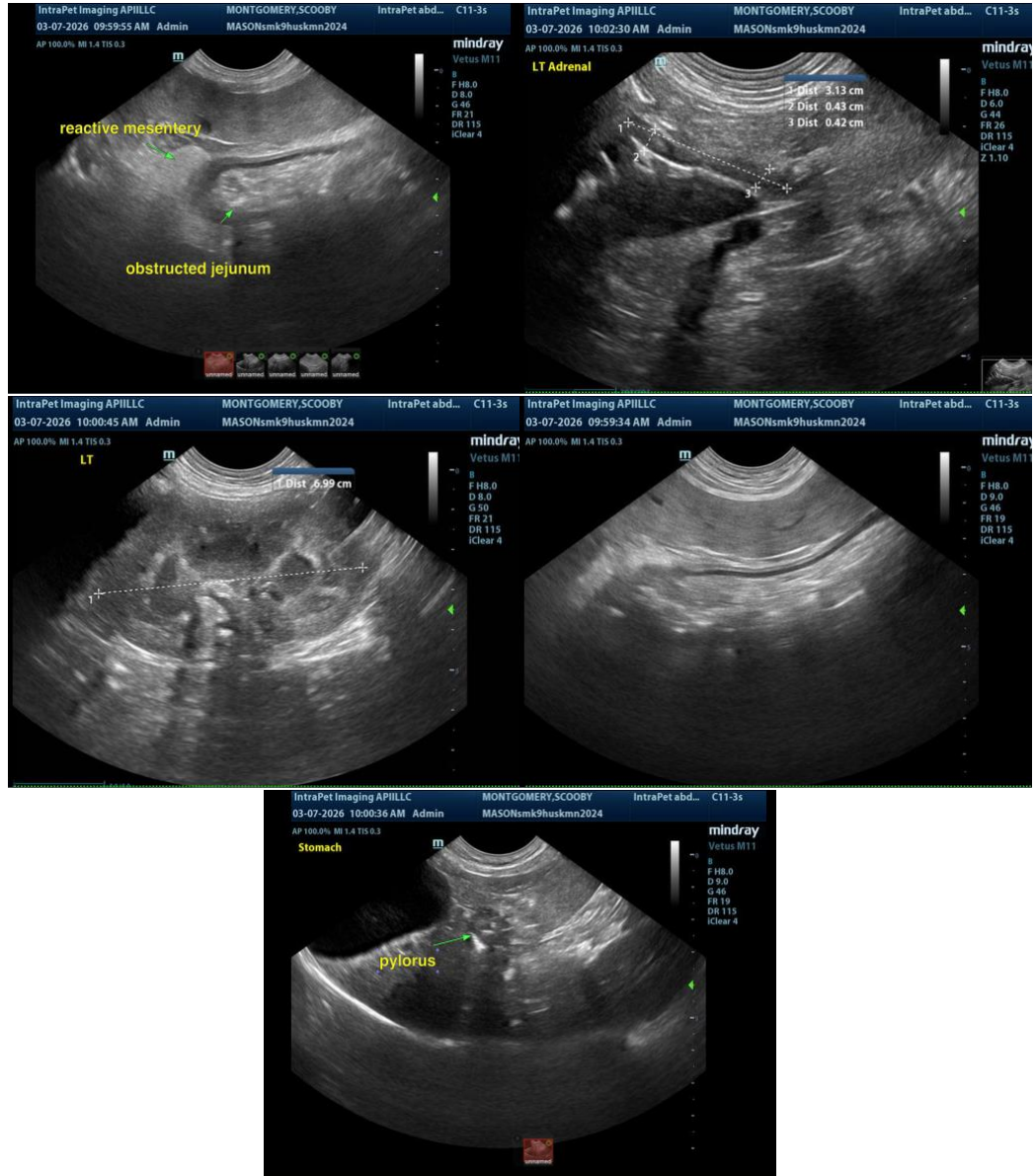
- Foreign body obstruction in the mid to distal small intestine medial to the spleen.
- Flattened adrenal glands.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Surgical intervention is warranted. GI biopsies recommended to rule out underlying disease.

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.

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

CEO, Owner, Founder -- SonoPath.com

info@SonoPath.com