



PATIENT

Franklin Sofley

SPECIES

Canine

BREED

Golden Retriever

SEX

Neutered male

AGE

10 years

WEIGHT

76.8 lbs

INTERPRETED BY

Eric Lindquist, DMV
 DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Forest Oaks AH

REFERRING VET

Dr. Kleisch

INVOICE

68864

DATE

11/20/25

PRESENTING CLINICAL SIGNS

History: P presented for chronic vomiting,, loss in appetite, burping while sleeping, weaker P has history of removed foreign body 3 years ago acute vomiting will respond to therapy but then back to vomiting

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 4.0 cm beyond the cystourethral junction and appeared normal. 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 **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 7.16 cm.

The residual prostate measured 0.9 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. The right adrenal gland measured 2.04 x 1.16 cm at the cranial pole and 0.66 cm at the caudal pole. The left adrenal gland measured 3.78 x 0.65 cm at the caudal pole and 0.67 cm at the cranial pole.

Spleen

The **spleen** in this patient was mildly enlarged with uniform parenchyma and was folded upon itself caudally. This is a positional variant and is not pathological. There was no evidence of significant disease.

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.



PATIENT

Franklin Sofley

SPECIES

Canine

BREED

Golden Retriever

SEX

Neutered male

AGE

10 years

WEIGHT

76.8 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Forest Oaks AH

REFERRING VET

Dr. Kleisch

INVOICE

68864

DATE

11/20/25

Gastrointestinal

The upper **gastrointestinal tract** revealed a mild amount of stasis with hyperperistalsis. The distal jejunum revealed a section of approximately 2.0 x 6.0 cm with stricturing portion of intestine and linear foreign body. A shadowing 4.0 cm+ cloth type foreign body with linear attachment. There was reactive mesentery and early peritonitis noted.

Pancreas

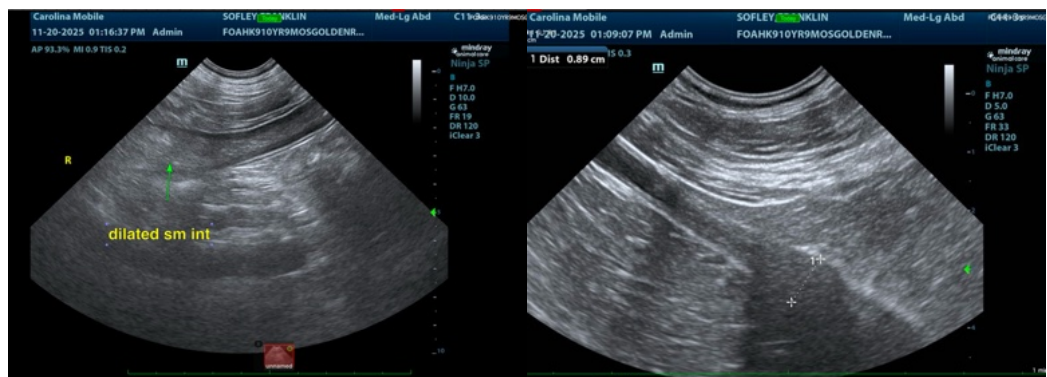
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

- Distal small intestinal foreign body obstruction with linear attachment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I cannot rule out pyloric attachment, yet cannot be followed cranially. Intestinal resection is recommended as the bowel does not appear healthy. Resection of approximately 8.0 cm of small intestine is recommended with appropriate biopsies. I cannot rule out underlying neoplasia, yet foreign body is definitive.





PATIENT

Franklin Sofley

SPECIES

Canine

BREED

Golden Retriever

SEX

Neutered male

AGE

10 years

WEIGHT

76.8 lbs

INTERPRETED BY

Eric Lindquist, DMV
 DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Forest Oaks AH

REFERRING VET

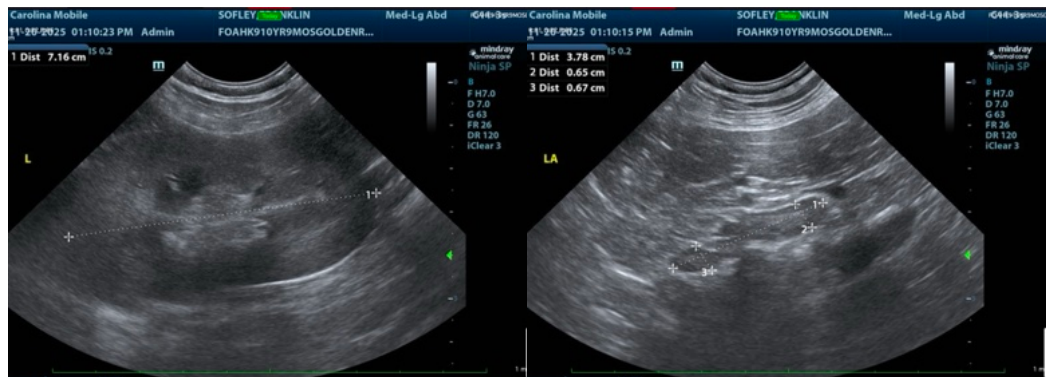
Dr. Kleisch

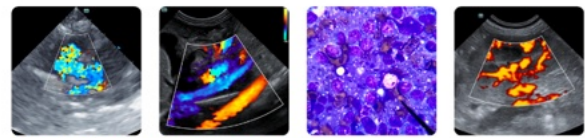
INVOICE

68864

DATE

11/20/25





PATIENT

Franklin Sofley

SPECIES

Canine

BREED

Golden Retriever

SEX

Neutered male

AGE

10 years

WEIGHT

76.8 lbs

INTERPRETED BY

Eric Lindquist, DMV
 DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Forest Oaks AH

REFERRING VET

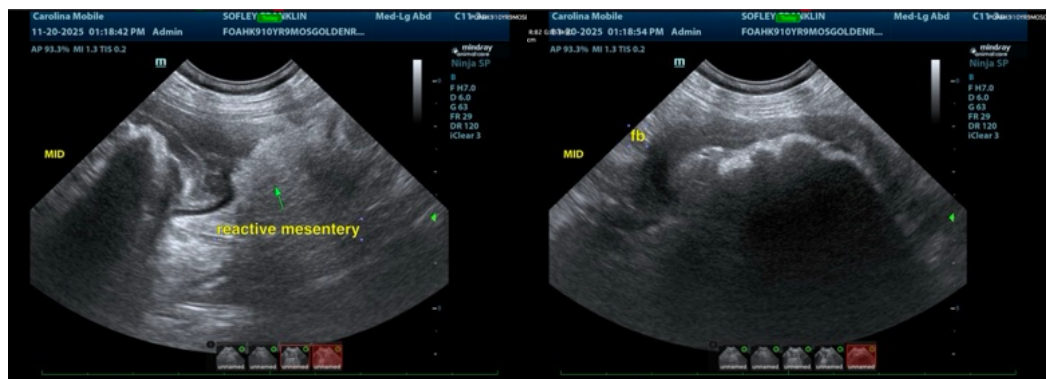
Dr. Kleisch

INVOICE

68864

DATE

11/20/25



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, Cert. IVUSS, CEO of SonoPath.com

info@SonoPath.com