



PATIENT

Harley Ferrao

PRESENTING CLINICAL SIGNS

Possible foreign body. Harley ate an absorbent packet, emesis all night and packet didn't come out.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 5 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no evidence of urine/lumen sediment, mineral, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

BREED

Doberman Pinscher

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 6.7 cm in length. The right kidney measured 7.1 cm in length.

SEX

FS

AGE

8yr

The area of the aortic trifurcation was free of pathology.

The residual prostate appeared normal and free of pathology.

Adrenal Glands

WEIGHT

62lb

A well-defined, hyperechoic nodule was present in the mid cranial left adrenal gland with mild associated symmetrical capsule expansion. The nodule did not exhibit signs of mineralization or vascular invasion. The nodule measured 0.42 cm in diameter. The left adrenal gland measured 0.58 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.58 cm width at the caudal pole.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

IMAGING PERFORMED BY

Shari Reffi CVT

Liver/Gallbladder

HOSPITAL NAME

All Creatures Denville

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. Normal vascular volume. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

REFERRING VET

Dr Silas Ashmore

Gastrointestinal

INVOICE
22839

DATE
11/03/2025



PATIENT

Harley Ferrao

SPECIES

Canine

BREED

Doberman Pinscher

SEX

FS

AGE

8yr

WEIGHT

62lb

The stomach presented intact mildly thickened wall layering with a normal wall layer ratio. The lumen of the stomach was empty with mild lumen gas and no signs of obstruction or foreign material.

The small intestine presented overall intact wall layering with maintained muscularis/mucosa ratio and primarily empty small intestine lumen. A segment of subjective mid-abdomen intestine, likely consistent with jejunal location, contained a strongly shadowing echo or content measuring ~ 2-3 cm in diameter.

Empty, segmental colon lumen with non-distended descending colon containing semi-formed to possible soft fecal matter was present.

Pancreas

The area of the pancreas was sonographically normal.

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary

- Jejunal foreign body-subjective non-obstructive
- Mildly thickened empty stomach
- Segmental descending colon semi-formed to possible soft fecal matter

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Exploratory laparotomy with gross inspection of the gastrointestinal tract and expectation toward enterotomy is recommended. Minor residual gastric or segmental intestinal foreign material non-obstructive or possibly obscured by mild gastric or segmental intestinal gas cannot be definitively excluded yet no overt additional areas of definitive gastrointestinal foreign material. Mild associated inflammatory jejunal mural changes in the area of jejunal foreign body suspected. Concurrent intestinal biopsies at the time of surgery may be considered pending gross inspection of the gastrointestinal tract.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

**IMAGING
PERFORMED BY**

Shari Reffi CVT

HOSPITAL NAME

All Creatures Denville

REFERRING VET

Dr Silas Ashmore

**INVOICE
22839**

**DATE
11/03/2025**



PATIENT

Harley Ferrao

SPECIES

Canine

BREED

Doberman Pinscher

SEX

FS

AGE

8yr

WEIGHT

62lb

INTERPRETED BY

R. McKenzie Daniel,
 DVM, DABVP
 (Canine and Feline)

IMAGING PERFORMED BY

Shari Reffi CVT

HOSPITAL NAME

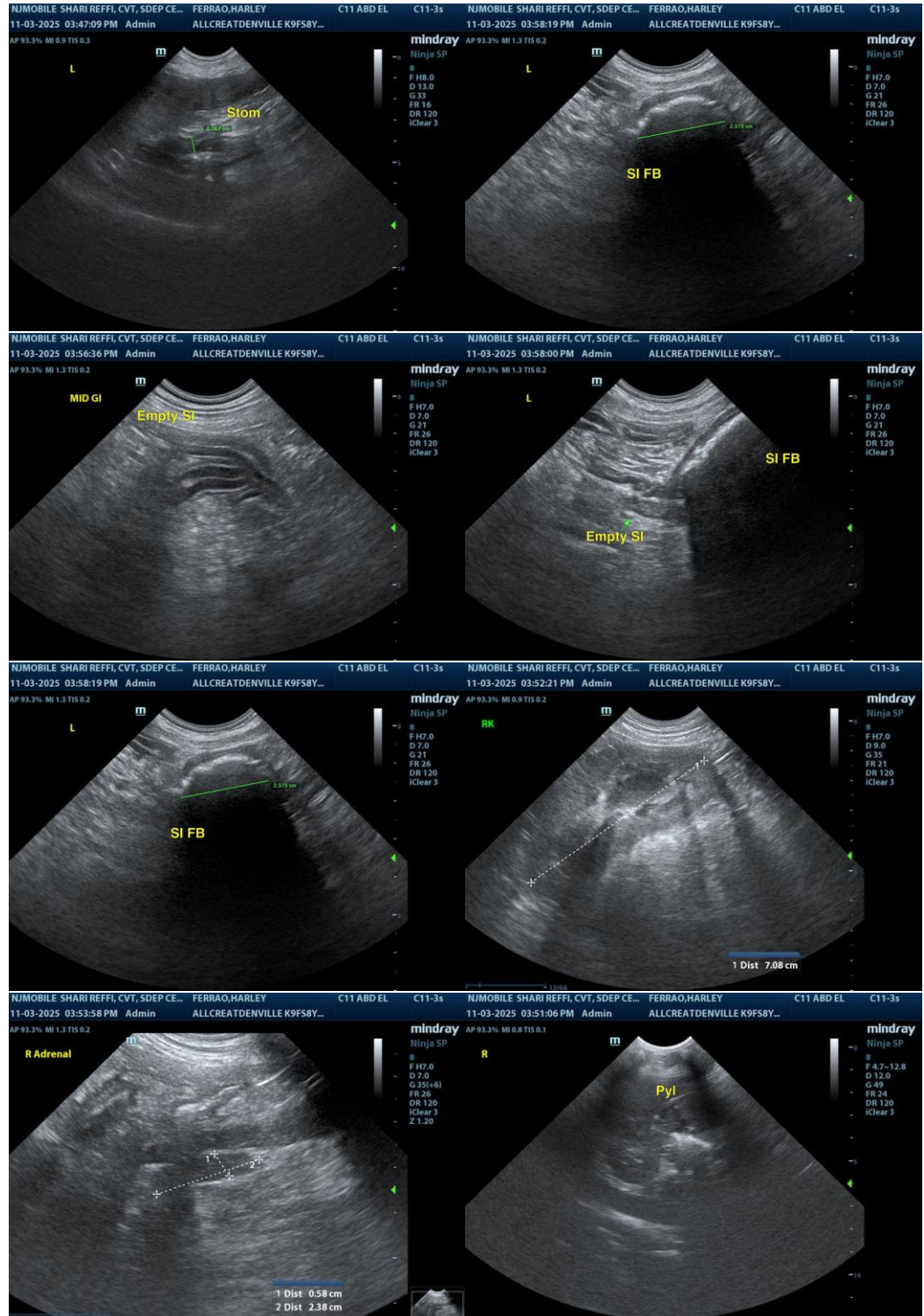
All Creatures Denville

REFERRING VET

Dr Silas Ashmore

INVOICE
 22839

DATE
 11/03/2025





PATIENT

Harley Ferrao

SPECIES

Canine

BREED

Doberman Pinscher

SEX

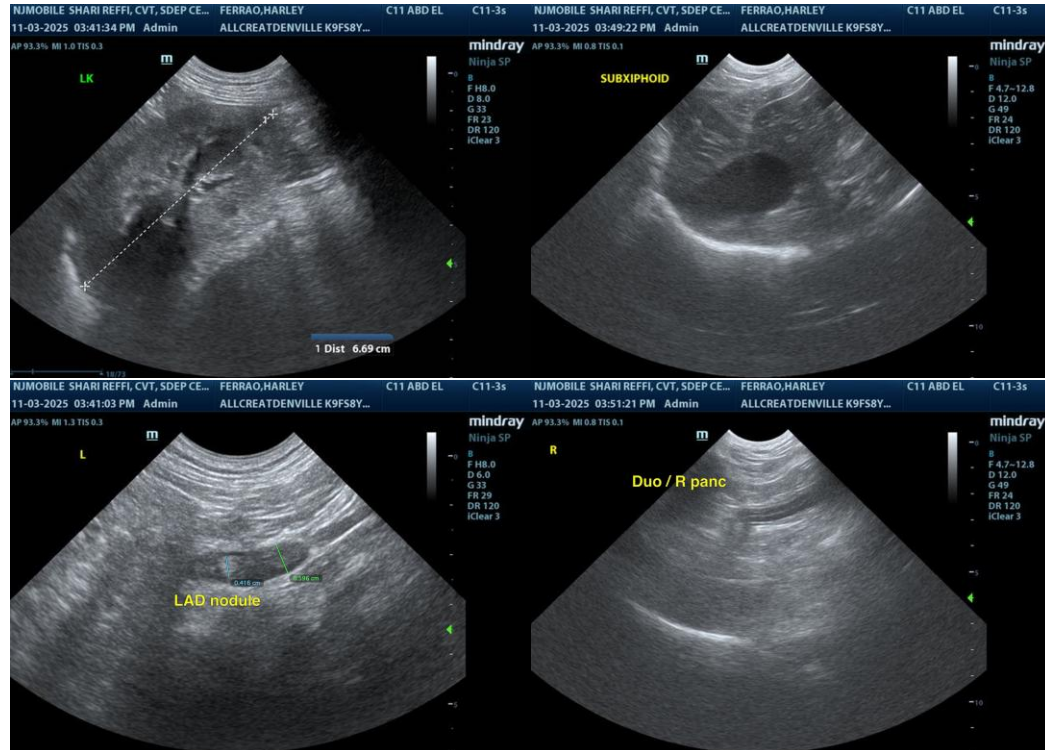
FS

AGE

8yr

WEIGHT

62lb



INTERPRETED BY

R. McKenzie Daniel,
 DVM, DABVP
 (Canine and Feline)

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.

IMAGING PERFORMED BY

Shari Reffi CVT

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
info@sonopath.com

HOSPITAL NAME

All Creatures Denville

REFERRING VET

Dr Silas Ashmore

INVOICE
 22839

DATE
 11/03/2025