



PATIENT

Kylo Taphorn

SPECIES

Canine

BREED

Retriever Mix

SEX

MN

AGE

3yr

WEIGHT

38kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Jill Rankin

HOSPITAL NAME

Petzoic Vet Hospital

REFERRING VET

Dr Ehab

INVOICE

22840

DATE

11/03/2025

PRESENTING CLINICAL SIGNS

The patient is a nearly four-year-old male presenting with acute gastrointestinal signs, lethargy, and dehydration, with a history highly suspicious for a foreign body obstruction. Five days prior to presentation, the patient ingested a sanitary pad. He was reportedly doing well until two days ago, when he began vomiting several times and became lethargic. For the one and a half days leading up to the visit, he has had no bowel movements. Radiographs taken today but could not appreciate overt FB. The owner has expressed a desire to explore all non-invasive options first.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.

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 7.5 cm in length. The right kidney measured 6.8 cm in length.

The area of the aortic trifurcation was free of pathology.

The area of the residual prostate appeared normal and free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.56 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 0.76 cm width at the caudal pole.

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.

Liver/Gallbladder

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.



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Gastrointestinal

The stomach presented intact mildly thickened wall layering. The lumen of the stomach was empty with mild lumen gas and no signs of obstruction or foreign material. The stomach wall measured 0.43-0.52 cm in width.

The small intestine presented intact wall layering with maintained muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of mechanical/metabolic ileus, obstruction or foreign material. The duodenum wall measured 0.50 cm width. The jejunum wall measured 0.47 cm width.

Normal visible colon wall layers were present with semi formed feces in lumen.

Pancreas

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

Free Abdomen

No omental masses or peritoneal effusion was present.

Intermittent mild to variably prominent homogenous mesenteric lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example measured 4.0 cm x 0.76 cm.

ULTRASONOGRAPHIC FINDINGS

Primary

- Empty stomach with mild gastritis pattern
- Sonographically normal empty small intestine / area of pancreas
- Formed to semi-formed fecal matter in colon
- Intermittent mild to variable mesenteric lymphadenopathy - subjective benign, mild variable reactive hyperplasia or possible mild inflammation probable.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of gastrointestinal obstructive pattern or overt foreign material. Given patient history potential passed foreign material intermixed with fecal matter in the colon cannot be excluded. No indication for immediate surgical intervention.

Gastrointestinal support with concurrent rehydration and clinical monitoring of the next 1-2 days is recommended. Sonographic reassessment may be considered if continued or progressive gastrointestinal signs.



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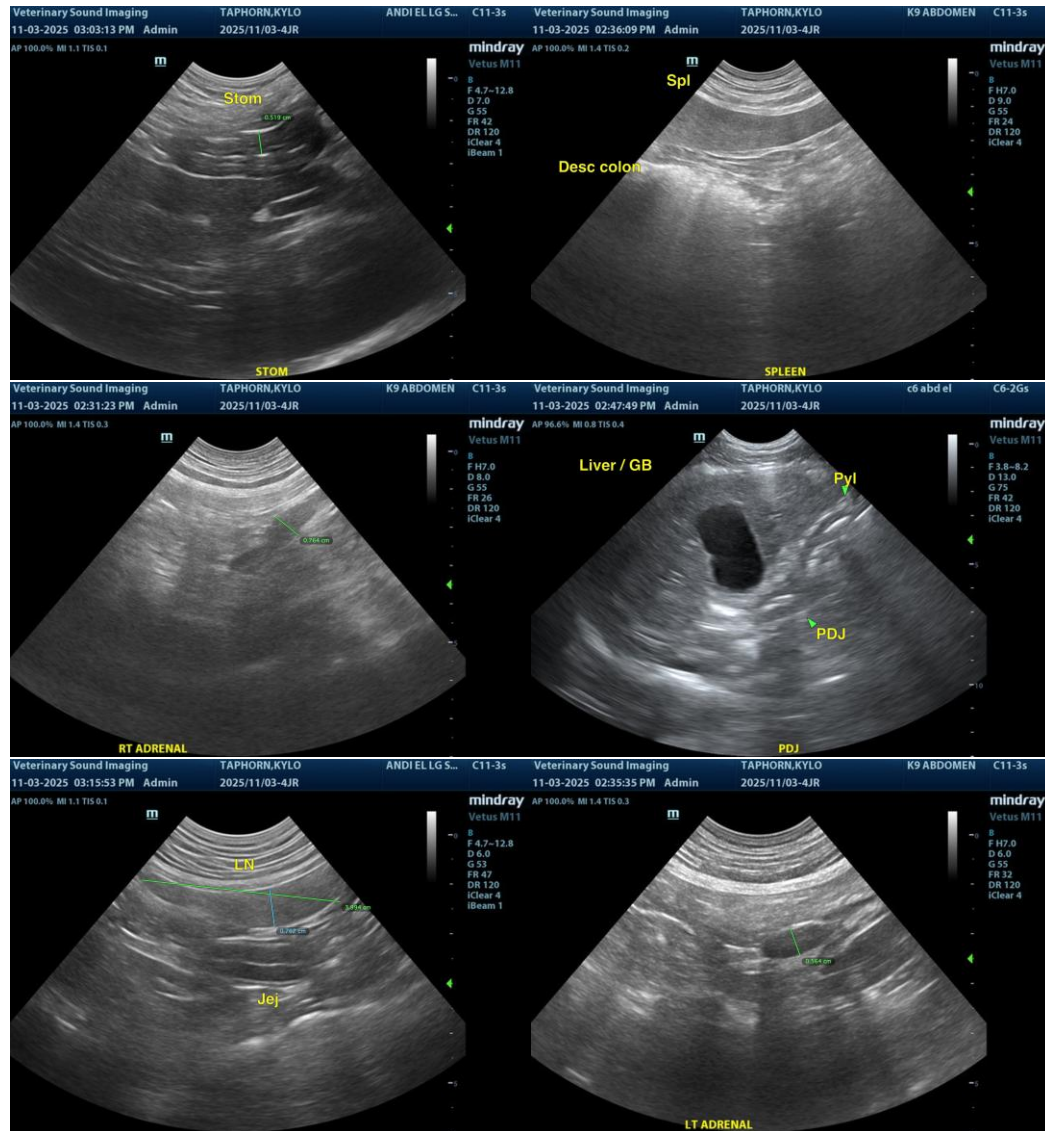
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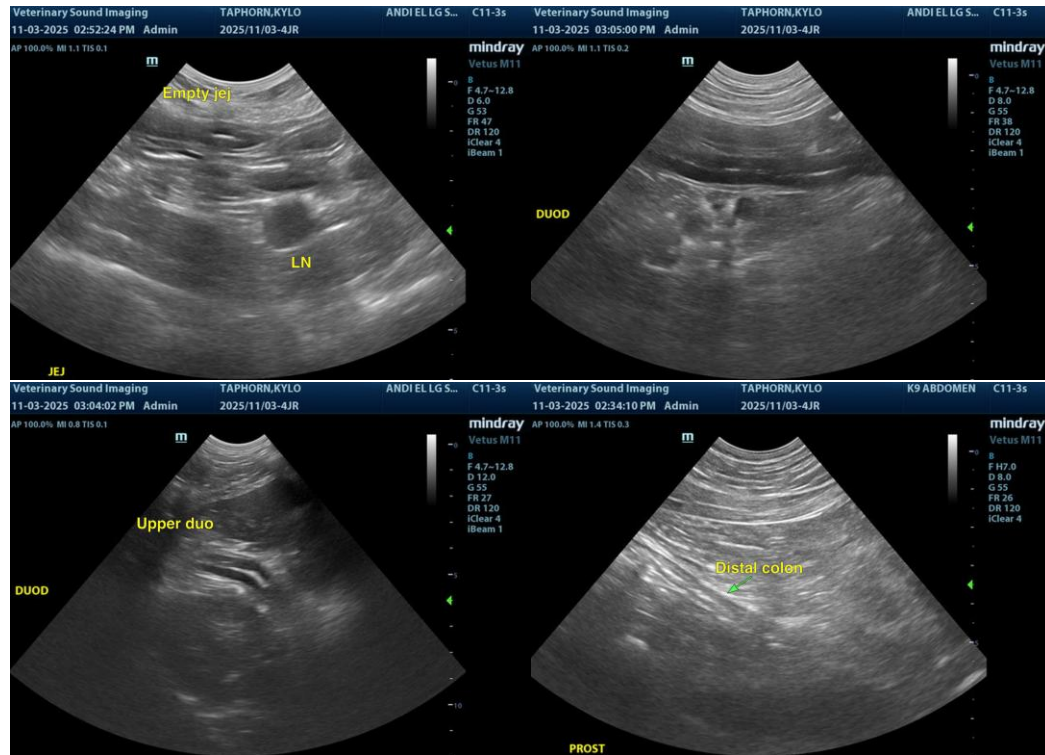
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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info@sonopath.com