



## PATIENT

Aussie Petryk

## SPECIES

Canine

## BREED

Golden Retriever

## SEX

Neutered Male

## AGE

13 Years

## WEIGHT

32.3 kg

## INTERPRETED BY

R. McKenzie Daniel,  
DVM, DABVP (Canine  
/ Feline Practice)

## IMAGING PERFORMED BY

Dr. Stephanie Cory

## HOSPITAL NAME

Brighton Veterinary  
Clinic PC Inc

## REFERRING VET

Dr. Brendan Loewen

## INVOICE

15698

## DATE

05/01/26

## PRESENTING CLINICAL SIGNS

Vomiting x 2 weeks, decreased appetite, diarrhea starting last week. CBC/chem unremarkable. Patient was fasted for over 14 hours for this AUS and only had a small meal last night (14 hours ago). Suspect mass in stomach causing delayed stomach emptying. Want AUS review before planning possible ex lap for excisional biopsy of mass, to help determine feasibility of removal and screen for any concurrent issues. Owner would prefer ex lap over AUS-guided FNA.

## 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 uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic change were noted.

Normal size and margination was 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.

### Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. 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 0.69 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. The hepatic and portal vasculature were normal in appearance without signs of congestion.

The gallbladder was non distended in size with minor gravity dependent nonorganized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

### Gastrointestinal

The stomach presented intact normal wall layering. The stomach exhibited moderate distention with retained fluid and nonshadowing ingesta/chyme. Within the subjective area of the antrum to pylorus, a solitary mural mass measuring approximately 5.0 cm to 6.0 cm in diameter was present, appearing to originate from the dorsal antrum/pylorus wall and extending into the antrum and pylorus lumen. The



**PATIENT**

Aussie Petryk

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

Neutered Male

**AGE**

13 Years

**WEIGHT**

32.3 kg

**INTERPRETED BY**

R. McKenzie Daniel,  
DVM, DABVP (Canine  
/ Feline Practice)

**IMAGING  
PERFORMED BY**

Dr. Stephanie Cory

**HOSPITAL NAME**

Brighton Veterinary  
Clinic PC Inc

**REFERRING VET**

Dr. Brendan Loewen

**INVOICE**

15698

**DATE**

05/01/26

remainder of the stomach wall was sonographically normal and nonthickened exhibiting overtly normal intact wall layering.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.

Normal visible colon wall layers were present with apparent 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 obvious visualized significant omental or perigastric lymphadenopathy or peritoneal effusion was present.

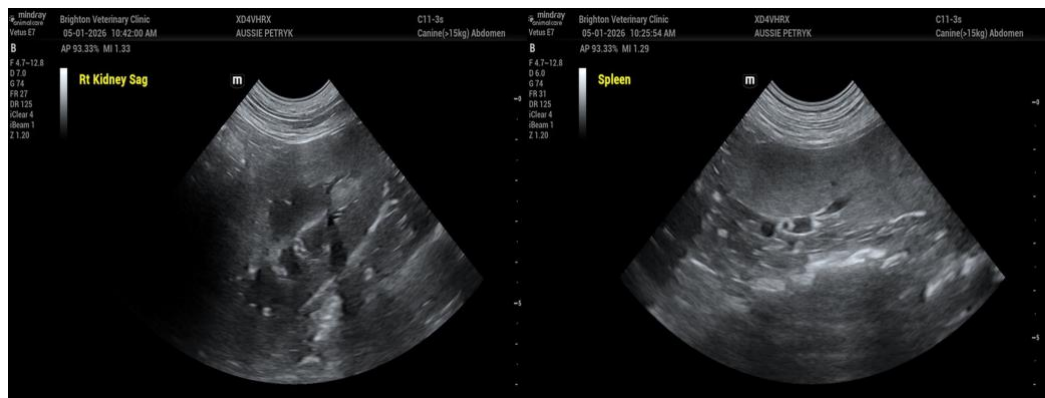
**ULTRASONOGRAPHIC FINDINGS**

- Gastric antrum/pyloric mass with moderate retained gastric fluid/chyme.
- Normal empty small intestine.
- Normal area of the pancreas.
- Minor gallbladder debris (non-mucocele).

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Inflammatory, granulomatous or neoplastic etiology is possible for the confirmed stomach mass. Definite evidence of complete pyloric outflow obstruction was not obvious, although some degree of partial obstruction or associated delayed gastric emptying is likely given the degree of retained gastric fluid/chyme. Definitive sonographic evidence of regional lymphatic metastasis was not obvious, yet micro metastasis or early non-sonographically evident lymphadenopathy is not definitively excluded.

The mass appears accessible to endoscopic biopsies if available. Otherwise, exploratory laparotomy with gross inspection of the mass with potential for resection versus biopsy, assuming no pathology on three view chest radiographs is warranted. Surgical consult is suggested prior to surgical considerations.





**PATIENT**

Aussie Petryk

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

Neutered Male

**AGE**

13 Years

**WEIGHT**

32.3 kg

**INTERPRETED BY**

R. McKenzie Daniel,  
DVM, DABVP (Canine  
/ Feline Practice)

**IMAGING  
PERFORMED BY**

Dr. Stephanie Cory

**HOSPITAL NAME**

Brighton Veterinary  
Clinic PC Inc

**REFERRING VET**

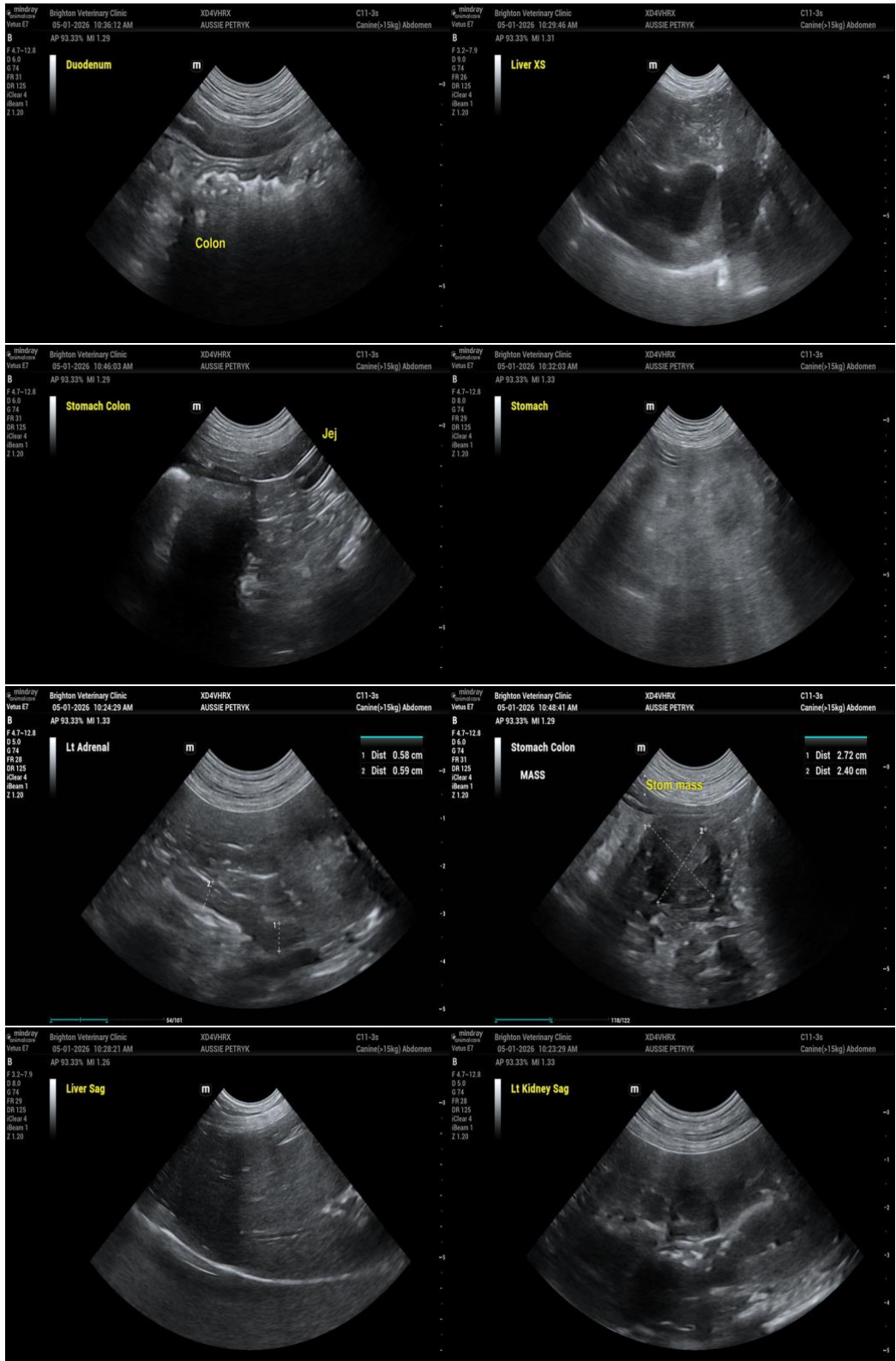
Dr. Brendan Loewen

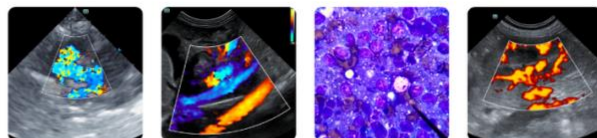
**INVOICE**

15698

**DATE**

05/01/26





## PATIENT

Aussie Petryk

## SPECIES

Canine

## BREED

Golden Retriever

## SEX

Neutered Male

## AGE

13 Years

## WEIGHT

32.3 kg

## INTERPRETED BY

R. McKenzie Daniel,  
DVM, DABVP (Canine  
/ Feline Practice)

## IMAGING PERFORMED BY

Dr. Stephanie Cory

## HOSPITAL NAME

Brighton Veterinary  
Clinic PC Inc

## REFERRING VET

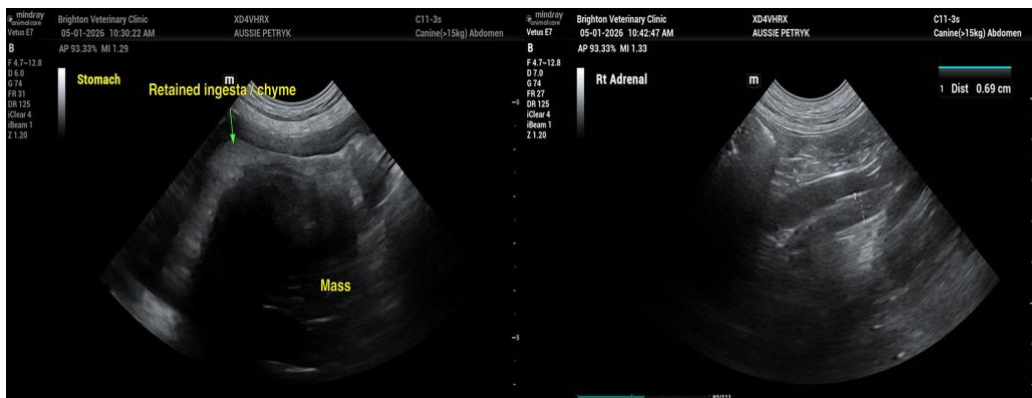
Dr. Brendan Loewen

## INVOICE

15698

## DATE

05/01/26



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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

[info@SonoPath.com](mailto:info@SonoPath.com)