



## PATIENT

Jasper Boyd

## SPECIES

Canine

## BREED

Golden Retriever

## SEX

Neutered Male

## AGE

8 Years 3 Months

## WEIGHT

51.2

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Ruth Loomis

## HOSPITAL NAME

Brookwood Animal  
Clinic, LLC

## REFERRING VET

Dr. Ruth Loomis

## INVOICE

16551

## DATE

05/28/26

## PRESENTING CLINICAL SIGNS

Anorexia x 2 days. O has not seen P vomit but has seen some regurgitation. 4 lb wt loss since 5/1/2026.

Blood work done on 5/1/2026 (cbc/basic chem panel) – WNL. current on vaccines. P has large yard and recently yard work maintenance including fertilizer

Abnormal PE/Chem/CBC/UA Results: neutropenia (2,560) w/bands lymphopenia (1,030) monocytosis (1,870) Mildly decreased platelets (146,000) HCT 53.8 % Chemistry panel WNL Electrolytes WNL

## 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.

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

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. The left kidney measured 5.3 cm in length. The right kidney measured 6.3 cm in length.

### Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.67 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 0.57 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 mild nonorganized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

### Gastrointestinal



## PATIENT

Jasper Boyd

## SPECIES

Canine

## BREED

Golden Retriever

## SEX

Neutered Male

## AGE

8 Years 3 Months

## WEIGHT

51.2

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Ruth Loomis

## HOSPITAL NAME

Brookwood Animal  
Clinic, LLC

## REFERRING VET

Dr. Ruth Loomis

## INVOICE

16551

## DATE

05/28/26

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

The intestinal walls demonstrated intact wall layering and maintained 1:3 muscularis / mucosa ratio. The mucosa exhibited mild decreased echogenicity with occasional mucosal speckling. A mild segmental ileus pattern is present without obstruction or foreign material to the level of the colon. The duodenum wall measured 0.55 cm wall width. The jejunum wall measured 0.34 cm wall width. The ileum wall measured 0.35 cm wall width.

Normal visible colon wall layers were present. The colon exhibited generalized moderate extension with nonformed fecal matter.

### **Pancreas**

The areas of the pancreas was sonographically normal.

### **Free Abdomen**

Focally enlarged jejunal lymph nodes were present. These lymph nodes were homogenous, mildly hypoechoic and smoothly marginated. A normal width: length ratio was maintained (<0.5). Mild perilymphatic hyperechoic omentum. No evidence of peritoneal effusion.

## ULTRASONOGRAPHIC FINDINGS

### **Primary Findings**

- Normal empty stomach.
- Non-specific acute enteropathy.
- Generalized colon distention with non-formed fecal matter.
- Jejunal lymphadenopathy.
- Normal area of pancreas.

### **Secondary Findings**

- Mild gallbladder debris (non-mucocele).
- Normal adrenal glands.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appearance of the gastrointestinal tract is non-specific with considerations including dietary intolerance / food hypersensitivity, infectious disease, dysbiosis, enterotoxin, inflammatory bowel disease, mild pancreatitis, occult parasitism, occult Addison's Disease, occult neoplasia, or other. Concurrent or associated jejunal reactive lymphatic hyperplasia, lymphadenitis, potential early metastatic lymphadenopathy are possible. A definitive area of mechanical intestinal obstruction was not visualized.

Assuming normal clotting status and if accessible. FNA cytology of jejunal lymph node could be considered for initial clarification. Recommend hospitalization with 24-hour gastrointestinal support including IV fluids and sonographic reassessment. If progressive evidence of intestinal ileus or non-responsive gastrointestinal signs, laparotomy with intestinal and lymphatic biopsies considered essential and may be indicated. Monitoring of CBC, a GI panel to include PLI, TLI, cobalamin and folate and screening cortisol level are warranted.



**PATIENT**

Jasper Boyd

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

Neutered Male

**AGE**

8 Years 3 Months

**WEIGHT**

51.2

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Dr. Ruth Loomis

**HOSPITAL NAME**

Brookwood Animal  
Clinic, LLC

**REFERRING VET**

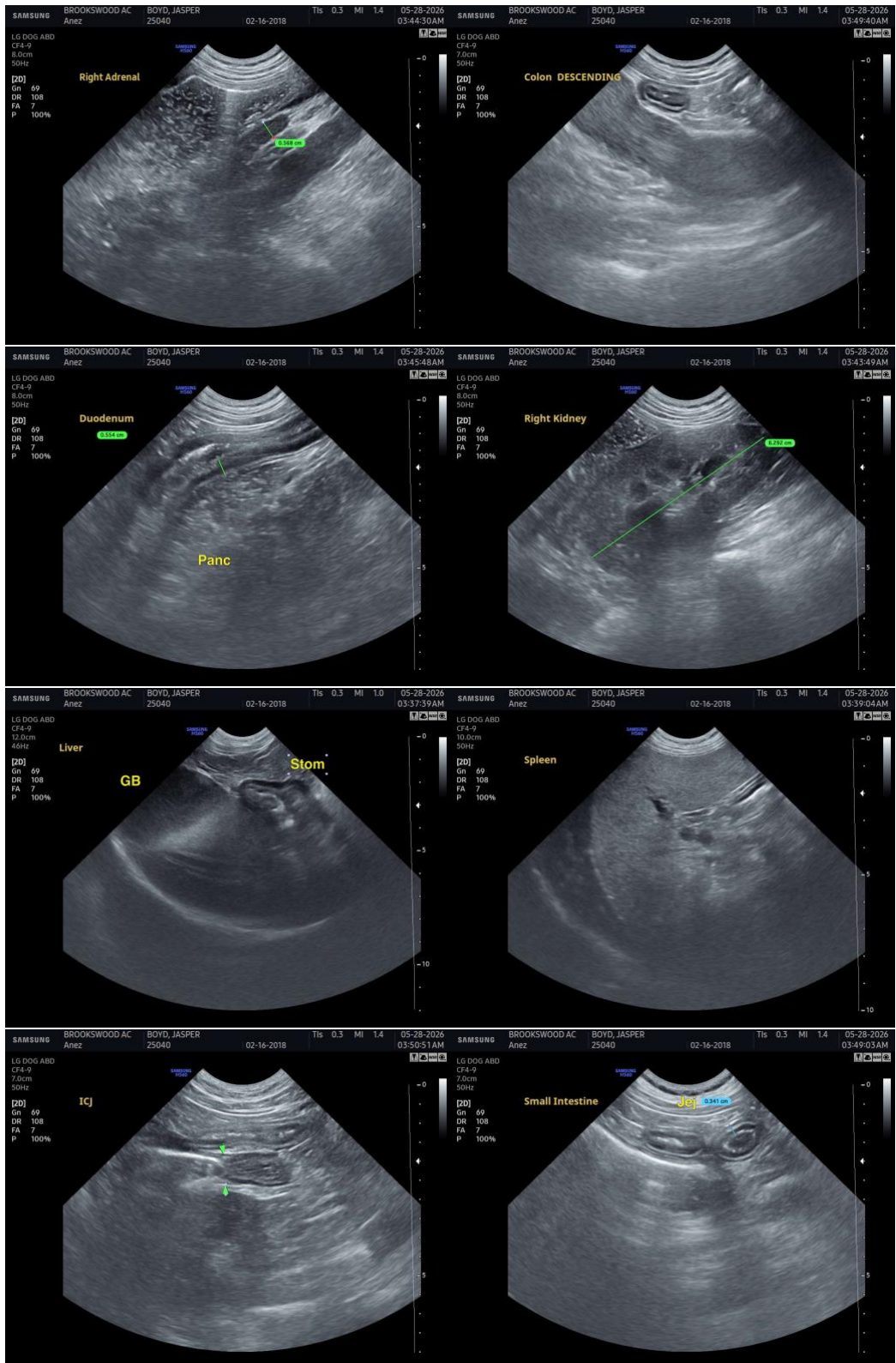
Dr. Ruth Loomis

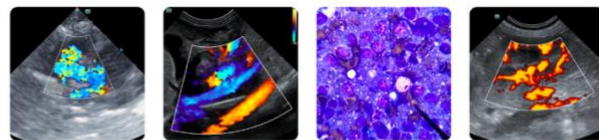
**INVOICE**

16551

**DATE**

05/28/26





## PATIENT

Jasper Boyd

## SPECIES

Canine

## BREED

Golden Retriever

## SEX

Neutered Male

## AGE

8 Years 3 Months

## WEIGHT

51.2

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Ruth Loomis

## HOSPITAL NAME

Brookwood Animal  
Clinic, LLC

## REFERRING VET

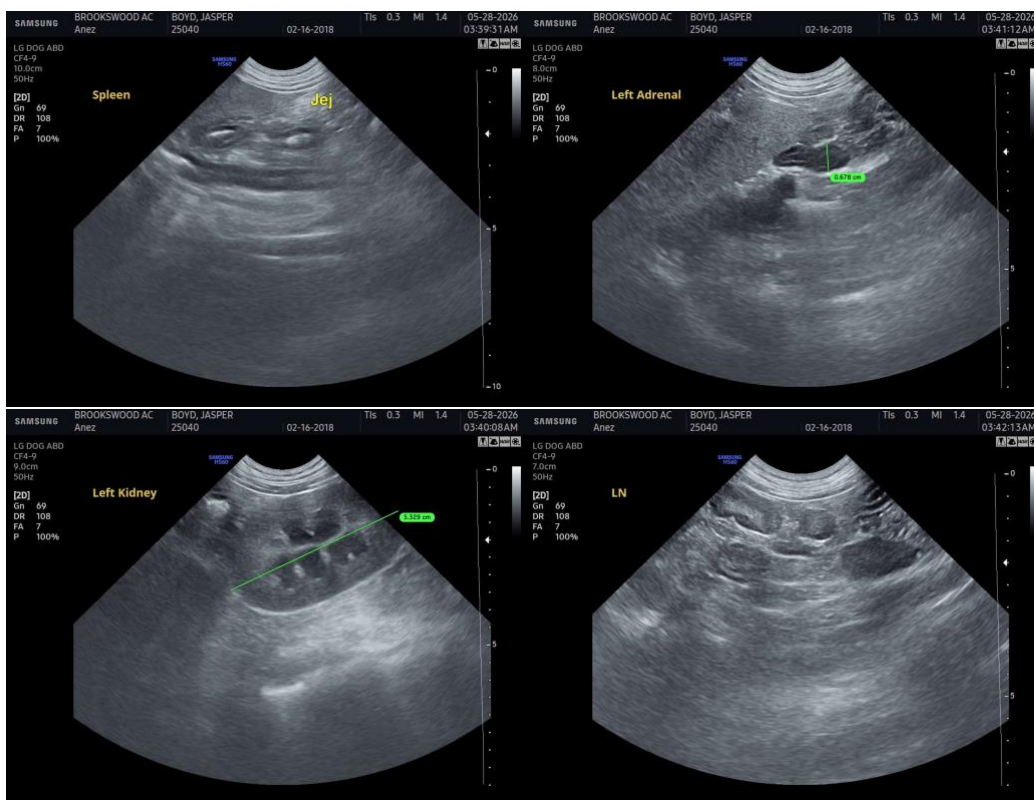
Dr. Ruth Loomis

## INVOICE

16551

## DATE

05/28/26



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)