



PATIENT

Coco Hunter

SPECIES

Canine

BREED

Labradoodle

SEX

Spayed female

AGE

8 years

WEIGHT

37.4 lbs

INTERPRETED BY

Remo Lobetti, BVSc,
MMedVet (Med),
PhD, Dipl. ECVIM

IMAGING PERFORMED BY

Kathleen Laux

HOSPITAL NAME

Rondout Valley VA

REFERRING VET

Dr. Laux

INVOICE

71031

DATE

1/28/26

PRESENTING CLINICAL SIGNS

- Patient presented for vomiting and not eating well. On radiographs can see dense foreign material in the area of pylorus/duodenum/possibly in colon. Trying to decide between medical management or exploratory surgery.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is full with a normal thickness and smooth appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

Normal appearance of the trigone area, proximal urethra, and iliac blood vessels.

Normal appearance and size of the iliac lymph nodes. Ureters not visualized, which can be considered a normal finding.

Normal renal size (left measured 5.6 cm, right measured 5.5 cm), architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident. Normal color flow pattern is evident in both kidneys.

Adrenal Glands

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 2.92 cm in length x 0.59 cm and 0.68 cm in width. The right adrenal gland measured 1.37 cm in length x 0.34 cm and 0.55 cm in width.

Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma and regular curvilinear capsule. Normal volume of the splenic vasculature without any overt congestion or thrombosis evident. No inflammatory, neoplastic, infarction, or infiltrative changes evident. The spleen measured 1.4 cm in width.

Liver

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Normal appearance of the hepatic and portal vasculature.

Gallbladder

The gallbladder is full containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct.



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Gastrointestinal

Fluid distended stomach with a small amount of shadowing material present in the pylorus. Normal thickness of the gastric wall with no loss of layering and maintaining a 1:3 muscularis to mucosa ratio. Increased peristaltic activity is evident. A small amount of fluid and shadowing material is present in the duodenum with the wall having a normal thickness showing no loss of layering and maintaining a 1:3 muscularis to mucosa ratio. Normal appearance of the small intestine, ileo-cecal junction, and colon with no loss of layering, 1:3 muscularis to mucosa ratio, normal wall thickness and peristaltic activity, and no distension of the lumen.

Pancreas

The visible sections of the pancreas are of normal size and echogenic appearance with a regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

Normal mesenteric lymph nodes.

No ascites evident.

ULTRASONOGRAPHIC FINDINGS

- Pyloric/duodenal foreign body.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ideal further assessment would be a laparotomy. Alternatively, symptomatic management using fluid therapy and correction of any electrolyte anomalies could be considered with the ultrasound repeated after 18-24 hours and if there is still no change in the appearance of the stomach and duodenum then a laparotomy would then be indicated.





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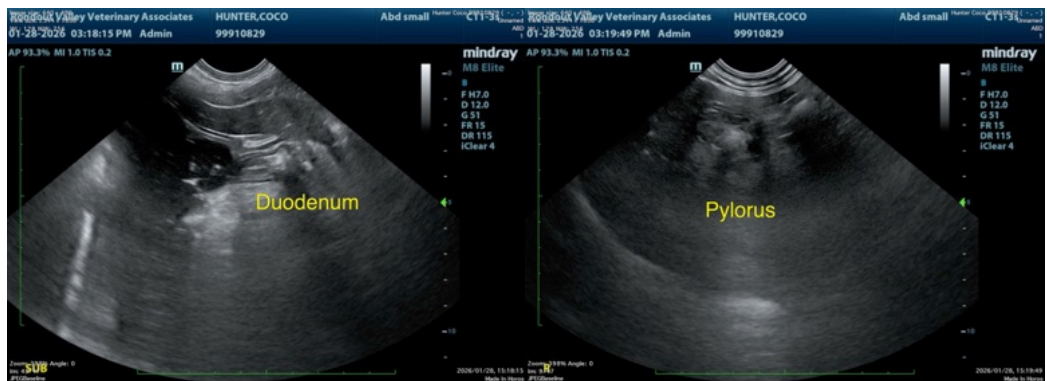
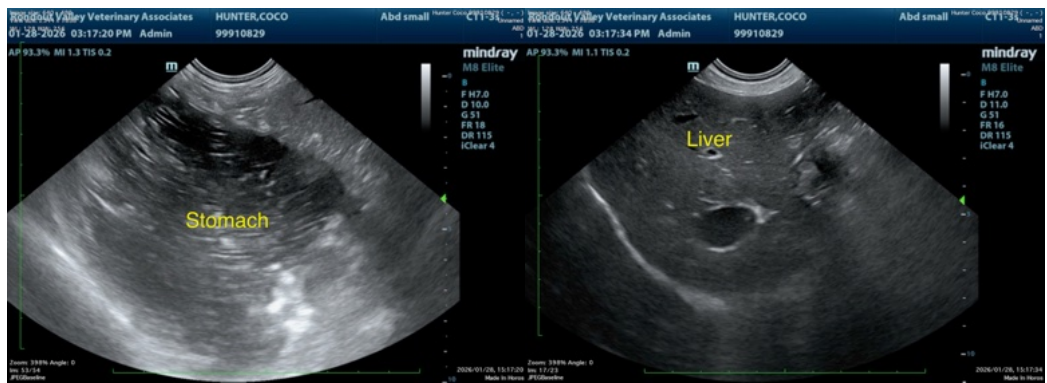
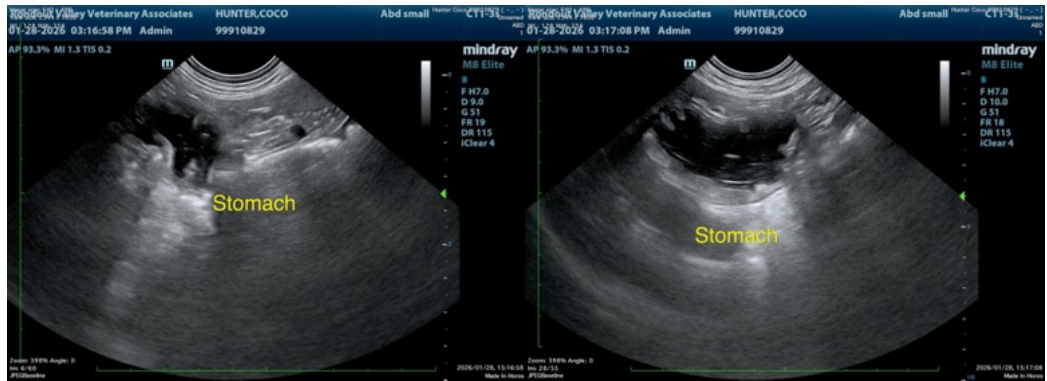
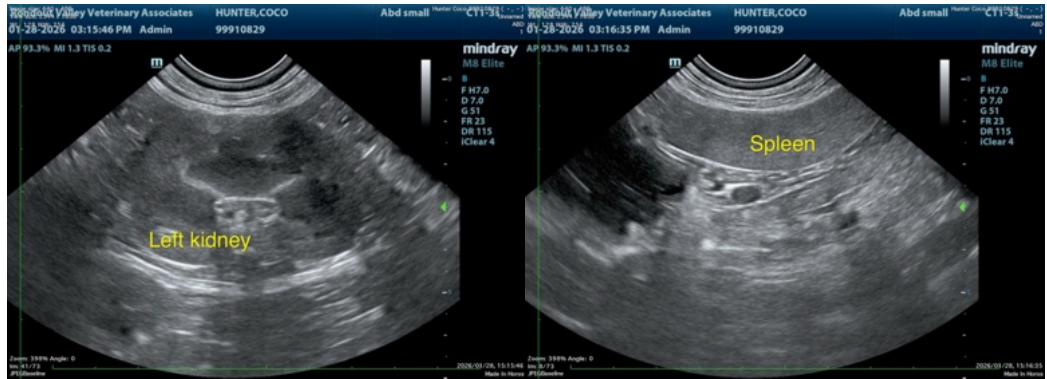
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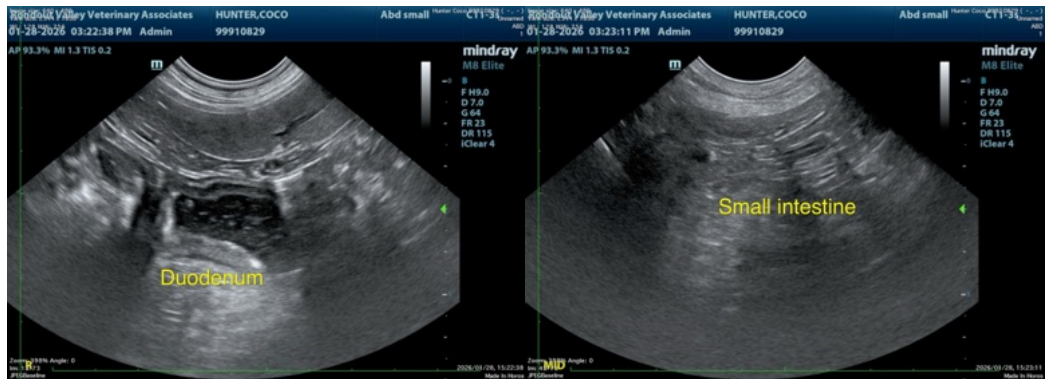
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)

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