



## PATIENT

June Ciccone

## SPECIES

Canine

## BREED

Labrador

## SEX

Spayed female

## AGE

6 years

## WEIGHT

59.2 lbs

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Kelsey

## HOSPITAL NAME

North Winds VS

## REFERRING VET

Dr. Sheruda

## INVOICE

69059

## DATE

11/26/25

## PRESENTING CLINICAL SIGNS

History: V/D x 1 week 10 pounds weight loss in 1 wk Diagnosed elsewhere with FB, rads taken here showed no obvious FB, but small focal opacities in chest CBC/CHEM all wnl P is still e/d wnl Abnormal PE/Chem/CBC/UA Results: Chest Rads showed small focal opacities

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 6.6 cm. The right kidney measured 6.6 cm.

### Adrenal Glands

The region of the right adrenal gland was unremarkable.

### Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

### Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.



## PATIENT

June Ciccone

## SPECIES

Canine

## BREED

Labrador

## SEX

Spayed female

## AGE

6 years

## WEIGHT

59.2 lbs

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Kelsey

## HOSPITAL NAME

North Winds VS

## REFERRING VET

Dr. Sheruda

## INVOICE

69059

## DATE

11/26/25

## Gastrointestinal

The **stomach** was over distended with chyme. The distal small intestine was dilated with fluid and hyperperistaltic. The distal small intestine also revealed a shadowing foreign body. Variable areas of small intestinal thickening was noted. Reactive mesentery was noted consistent with emerging peritonitis.

## Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

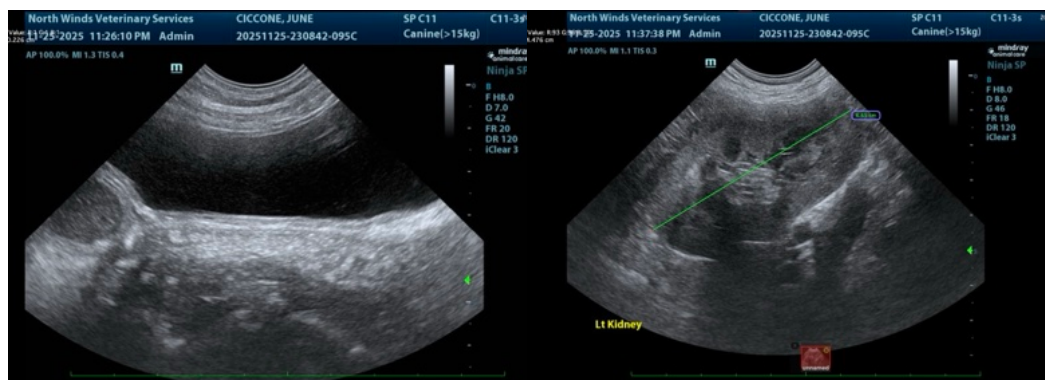
## ULTRASONOGRAPHIC FINDINGS

Distal small intestinal obstruction with emerging peritonitis.

Minor intestinal thickening.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Immediate exploratory surgery with enterotomy and intestinal biopsies are warranted to rule out underlying disease.





**PATIENT**

June Ciccone

**SPECIES**

Canine

**BREED**

Labrador

**SEX**

Spayed female

**AGE**

6 years

**WEIGHT**

59.2 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Kelsey

**HOSPITAL NAME**

North Winds VS

**REFERRING VET**

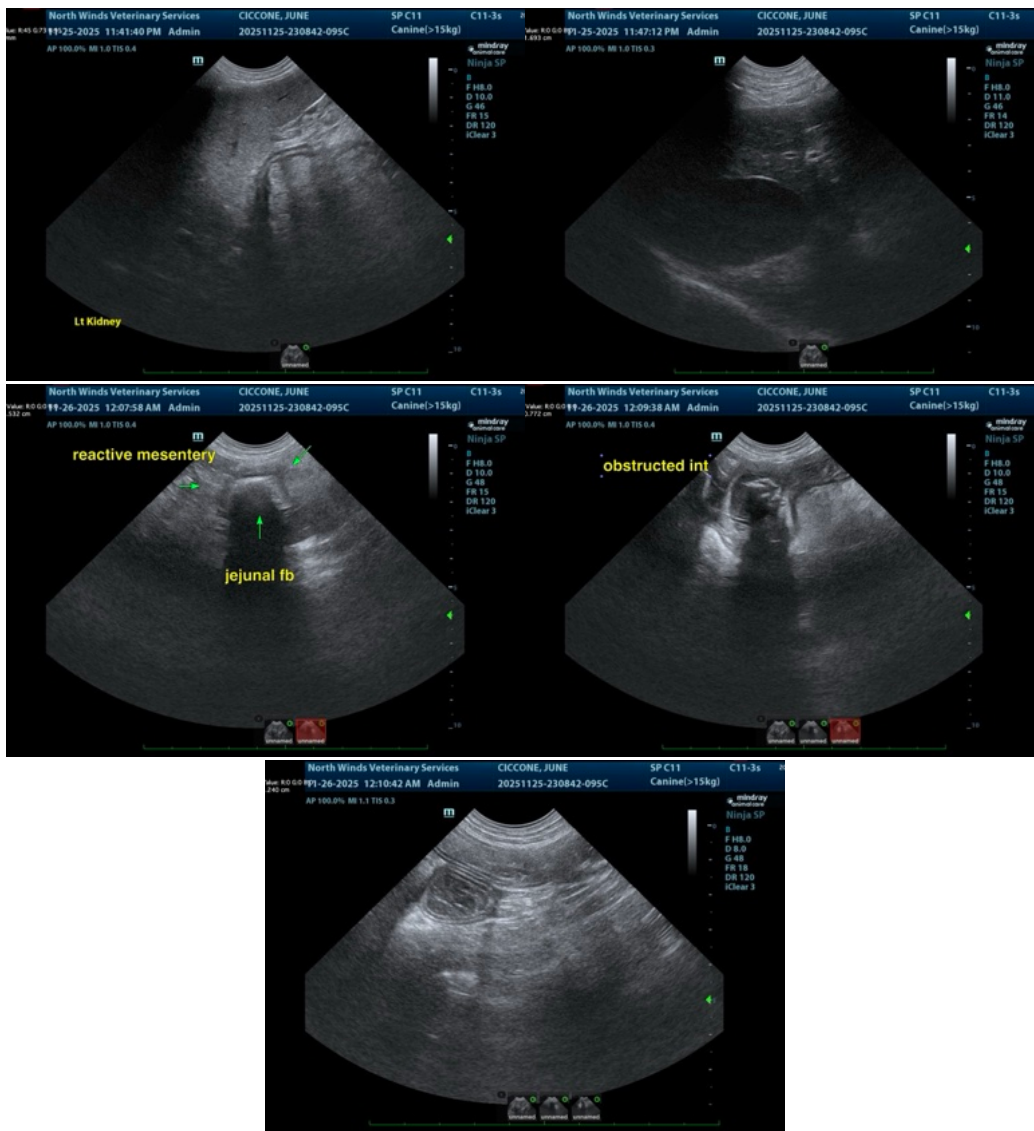
Dr. Sheruda

**INVOICE**

69059

**DATE**

11/26/25



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.

Eric Lindquist, DMV, DABVP (CFM), Cert. IVUSS, CEO of SonoPath.com

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