



PATIENT

Luna Franco

SPECIES

Canine

BREED

Boston Terrier

SEX

Spayed Female

AGE

7 Years

WEIGHT

19.2 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Suci

HOSPITAL NAME

Animal Clinic of
Queens

REFERRING VET

Dr. Mucera

INVOICE

14296

DATE

03/13/26

PRESENTING CLINICAL SIGNS

- vomiting since 3/8
- anorexia
- lethargy

Abnormal PE/Chem/CBC/UA Results: Blood work pending

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. The left kidney measured 4.4 cm in length. The right kidney measured 4.4 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 0.60 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 0.67 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.

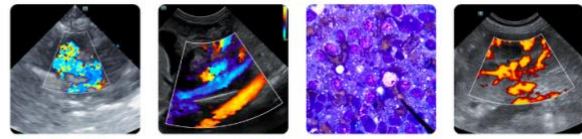
Liver & Gallbladder

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 thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented thickened wall. Intact wall layering was maintained and distinct. The stomach contained moderate retained anechoic to mildly echogenic fluid extending into the pyloric outflow and duodenum.



PATIENT

Luna Franco

SPECIES

Canine

BREED

Boston Terrier

SEX

Spayed Female

AGE

7 Years

WEIGHT

19.2 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Suci

HOSPITAL NAME

Animal Clinic of
Queens

REFERRING VET

Dr. Mucera

INVOICE

14296

DATE

03/13/26

The small intestine presented intact mildly thickened wall in the area of the duodenum and segmental jejunum with mild to moderate duodenal distention and retained fluid. Segmental strongly shadowing intestinal lumen echo was present to possible echoes consistent with intestinal foreign body to potential foreign bodies suspected to be at the level of the mid distal duodenum extending into the jejunum. Concurrent empty intestinal segments consistent with the jejunum subjectively distal exhibiting intact wall layering without evidence of mechanical/metabolic ileus to the approximate level of the ileum and colon. The shadowing intestinal lumen echo/echoes measured potentially 5.0 cm to 6.0 cm in length.

Normal visible colon wall layers were present with formed to semi formed fecal matter.

Pancreas

The area of the pancreas was sonographically normal.

Free Abdomen

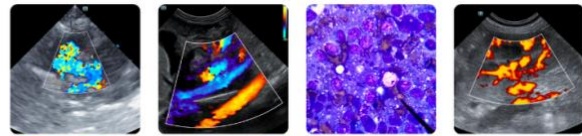
No obvious visualized significant omental lymphadenopathy or peritoneal effusion was present. Mild peri-intestinal hyperechoic omentum.

ULTRASONOGRAPHIC FINDINGS

- Small intestinal foreign body to potential foreign bodies with obstructive gastrointestinal pattern proximal, empty small intestine distal.
- Probable associated inflammatory intestinal mural changes and peri-intestinal reactive possibly mild inflamed omentum.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Exploratory laparotomy with gross inspection of the gastrointestinal tract with expectation toward enterotomy to potential enterotomies is recommended. Correlation with pending lab work is indicated. Gastrointestinal biopsy at time of surgery is suggested to assess for underlying intestinal disease while potential for resection and anastomosis pending gross inspection of the intestinal tract is not definitively excluded.



PATIENT

Luna Franco

SPECIES

Canine

BREED

Boston Terrier

SEX

Spayed Female

AGE

7 Years

WEIGHT

19.2 pounds

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Suci

HOSPITAL NAME

Animal Clinic of
Queens

REFERRING VET

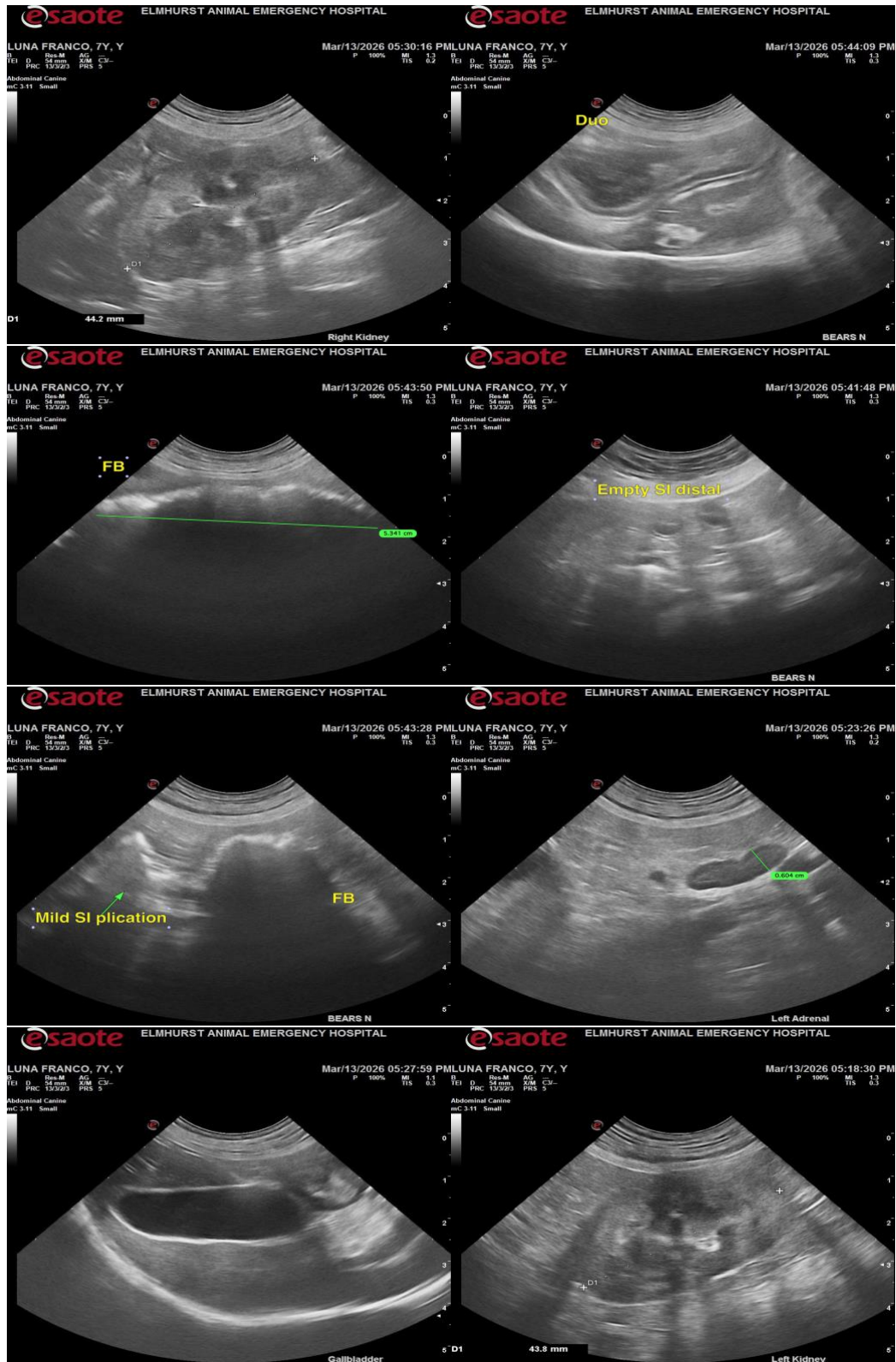
Dr. Mucera

INVOICE

14296

DATE

03/13/26





PATIENT

Luna Franco

SPECIES

Canine

BREED

Boston Terrier

SEX

Spayed Female

AGE

7 Years

WEIGHT

19.2 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Suciu

HOSPITAL NAME

Animal Clinic of
Queens

REFERRING VET

Dr. Mucera

INVOICE

14296

DATE

03/13/26



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