



## PATIENT

Max Maldonado

## SPECIES

Canine

## BREED

French Bulldog

## SEX

Intact Male

## AGE

2 Years

## WEIGHT

33.8 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Gabriel Ferrer,  
DVM

## HOSPITAL NAME

Pulse Pet Ultrasound  
Services

## REFERRING VET

Dr. Juliana Santiago

## INVOICE

16510

## DATE

05/26/26

## PRESENTING CLINICAL SIGNS

Px presented as a referral for an abdominal ultrasound due to vomiting, lethargy, and a possible foreign body observed in radiographs. Px originally visited rDVM due to lethargy, inappetence, and vomiting, BW and radiographs were performed, and a possible foreign body was observed within the intestines. Radiographs were repeated a few days later and the possible FB had moved down. Owner reports that Px has had bowel movements of a good consistency between yesterday and today.

Abnormal PE/Chem/CBC/UA Results: No supporting documents submitted by rDVM

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm 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 prostate was enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic without parenchymal mineralization. The prostate measured ~3.8 cm in diameter.

The visualized medial iliac lymph nodes were sonographically normal

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 4.8 cm in length. The right kidney measured 4.3 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 0.49 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 0.51 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.



## PATIENT

Max Maldonado

The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

## SPECIES

Canine

### **Gastrointestinal**

The stomach presented overall intact wall layering exhibiting mild thickened stomach and pylorus wall width. The stomach was primarily empty and nondistended containing lumen gas and a mild amount of retained fluid. No obstruction to pyloric outflow. The pylorus wall measured 0.62 cm wall width. The ventral gastric body wall measured 0.63 cm wall width.

## BREED

French Bulldog

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty without mechanical/metabolic ileus or visible foreign material to the level of the colon.

## SEX

Intact Male

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

## AGE

2 Years

### **Pancreas**

The pancreas presented normal in size with mild asymmetrical contour and mild nonhomogenous parenchyma with mildly prominent right limb pancreatic duct.

## WEIGHT

33.8 lbs

### **Free Abdomen**

No evidence of peritoneal effusion was present. Mild perigastric hyperechoic omentum and mild gastrojejunal lymphadenopathy with an example of gastric lymph node measuring 1.1 cm in diameter and an example of jejunal lymph node measuring 1.4 cm x 0.65 cm.

## INTERPRETED BY

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

## ULTRASONOGRAPHIC FINDINGS

- Intact, mildly thickened stomach wall with mild retained gastric fluid/gas.
- Normal empty small intestine.
- Formed fecal matter in colon.
- Mild perigastric hyperechoic omentum and mild gastrojejunal lymphadenopathy- subjective benign.
- Mild heterogeneous pancreas with mild prominent right pancreatic duct.

## IMAGING PERFORMED BY

Dr. Gabriel Ferrer,  
DVM

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

## HOSPITAL NAME

Pulse Pet Ultrasound  
Services

No evidence of gastrointestinal obstructive pattern or visible gastrointestinal foreign material. Nonspecific gastritis criteria is favored without overt gastro-pyloric obstructive criteria i.e. polyps, significant mucosal hyperplasia or persistent gastric foreign material.

## REFERRING VET

Dr. Juliana Santiago

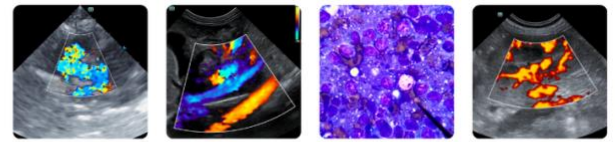
Assessment for evidence of cranial abdomen or sub-xiphoid discomfort on palpation which may suggest mild pancreatitis. Correlation with a spec cPL could be considered. Gastrointestinal support including broad spectrum gastroprotectants, dietary trial which may include canned novel protein, a diet with smaller and more frequent feedings +/- empirical helicobacter coverage with clinical and sonographic monitoring would be reasonable. Upper gastrointestinal endoscopy with biopsies if persistent gastrointestinal signs is likely indicated. Although considered less likely, screening cortisol level to rule out occult Addison's disease is suggested.

## INVOICE

16510

## DATE

05/26/26



### PATIENT

Max Maldonado

### SPECIES

Canine

### BREED

French Bulldog

### SEX

Intact Male

### AGE

2 Years

### WEIGHT

33.8 lbs

### INTERPRETED BY

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

### IMAGING PERFORMED BY

Dr. Gabriel Ferrer,  
DVM

### HOSPITAL NAME

Pulse Pet Ultrasound  
Services

### REFERRING VET

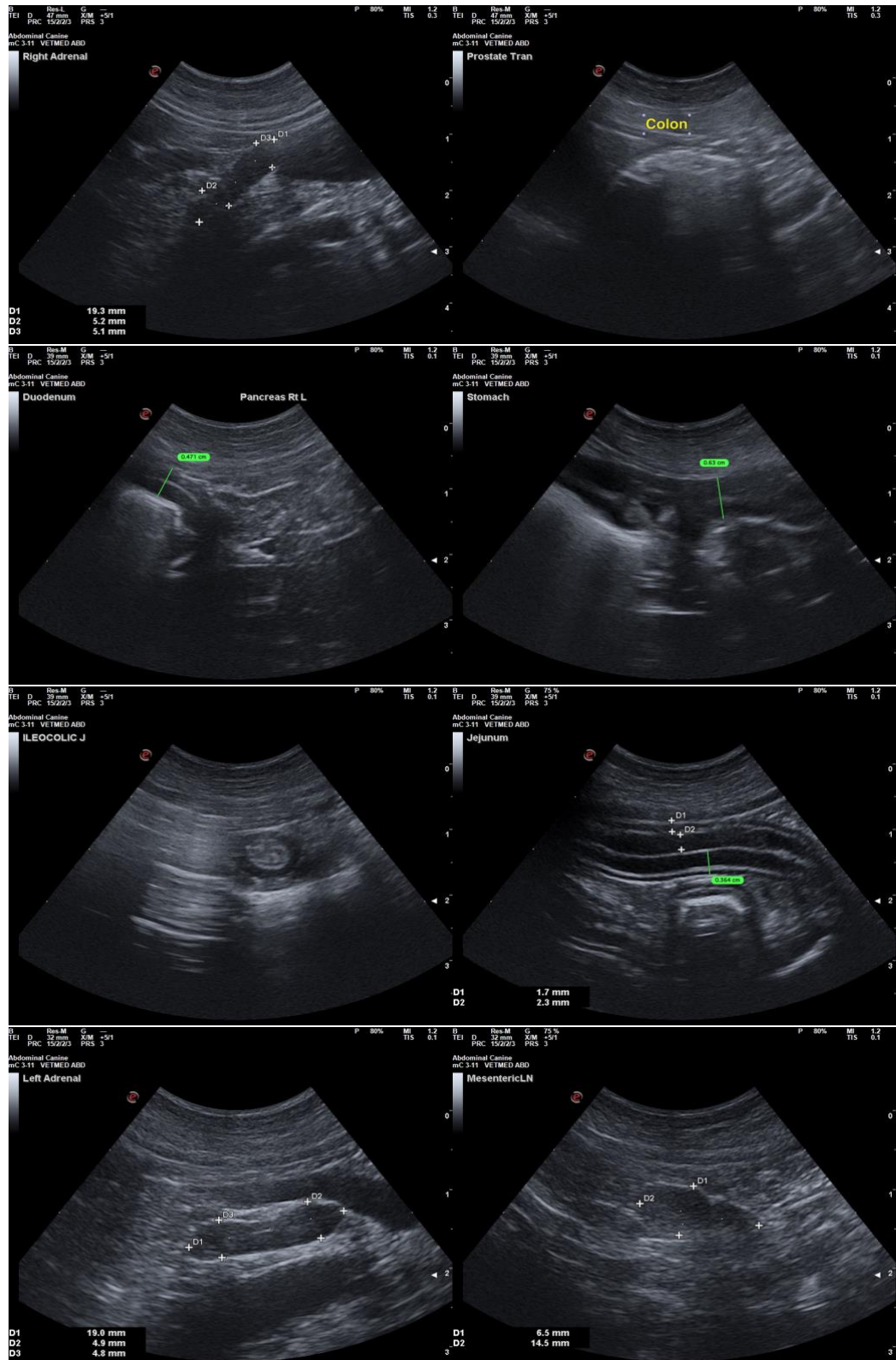
Dr. Juliana Santiago

### INVOICE

16510

### DATE

05/26/26





## PATIENT

Max Maldonado

## SPECIES

Canine

## BREED

French Bulldog

## SEX

Intact Male

## AGE

2 Years

## WEIGHT

33.8 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Gabriel Ferrer,  
DVM

## HOSPITAL NAME

Pulse Pet Ultrasound  
Services

## REFERRING VET

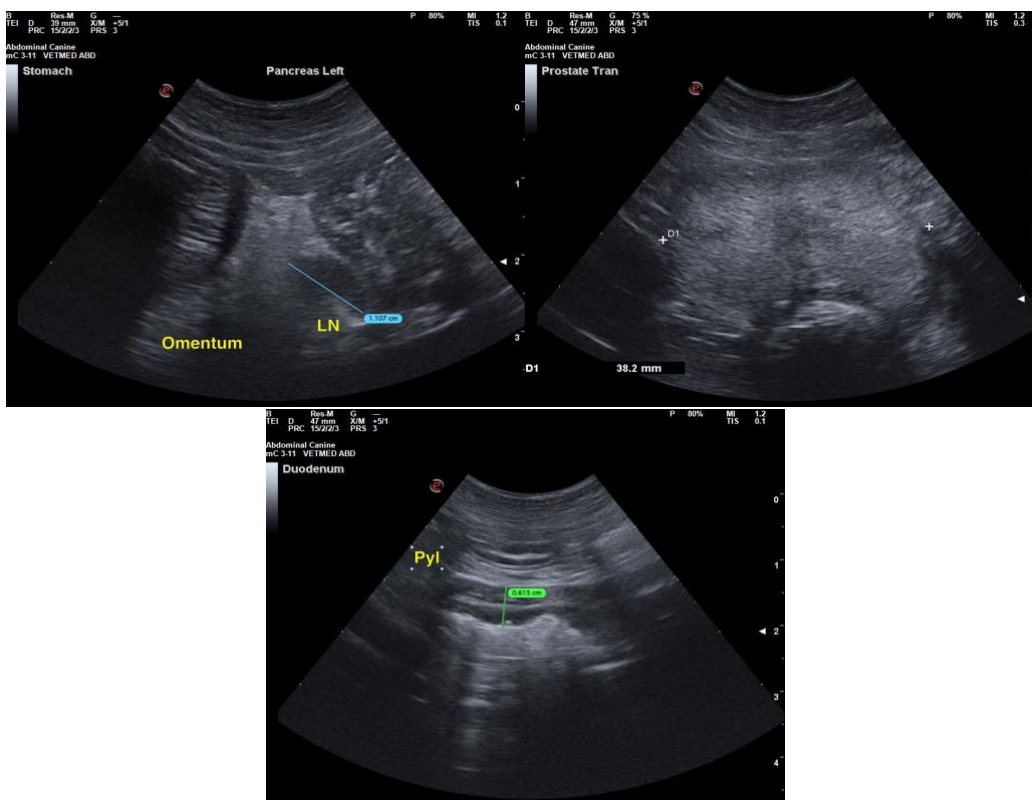
Dr. Juliana Santiago

## INVOICE

16510

## DATE

05/26/26



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)