



**PATIENT**

Hazel Walker

**SPECIES**

Canine

**BREED**

Dachshund

**SEX**

Intact Female

**AGE**

5 Months

**WEIGHT**

7.4 lbs

**INTERPRETED BY**

Karen Ebersole, DVM,  
 DABVP (Canine and  
 Feline)

**IMAGING PERFORMED BY**

Sara Hansen

**HOSPITAL NAME**

Albany Animal Hospital

**REFERRING VET**

Dr. Hunt

**INVOICE**

72118

**DATE**

11/26/25

**PRESENTING CLINICAL SIGNS**

Pt received Cerenia IV last night and Trazadone orally last night. No continued vomiting lat night or today. NPO today! Recheck from yesterday's abdominal ultrasound.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The bladder was normal in size and shape. The bladder wall was normal in thickness for the volume of urine present. The trigone and visible urethra were normal in appearance. The urine was anechoic with no visible sediment or uroliths. The pelvic urethra was visualized to a depth of X cm past the cystourethral junction.

The iliac trifurcation was normal in structure and volume. Normal appearing medial iliac lymph nodes. No evidence of thrombus formation on doppler exam.

Both kidneys were normal in size and shape with a smooth capsule contour. There was normal cortical echotexture with acceptable corticomedullary definition. There was no pelvic dilation. Left kidney measures 4.1 cm. Right kidney measures 4.4 cm.

**Adrenal Glands**

Both adrenal glands were normal in size and shape, with a smooth capsule contour. The parenchyma displayed normal echogenicity. There was no evidence of capsular expansion or pericapsular inflammation. There were no nodules or masses visible. Left measured 0.37 cm at the caudal pole and 0.42 cm at the cranial pole. Right measured 0.39 cm at the caudal pole and 0.51 cm at the cranial pole.

**Spleen**

The spleen was normal in size and shape, with a smooth capsule contour. The parenchyma was finely textured and homogeneous. The vasculature showed good vascularity with power doppler.

**Liver**

The liver was normal in size and shape, with a smooth capsule contour. The hepatic parenchyma displayed normal echotexture and portal markings. The hepatic vasculature was normal in volume and structure.

The gallbladder was normal in size and shape. The gall bladder was normal in size and shape. The luminal contents were anechoic. The cystic and common bile ducts were normal with no evidence of obstruction or inflammation.

**Gastrointestinal**

The stomach contained a small amount of fluid and a few shadowing and non-shadowing densities. The largest shadowing density in the stomach measured 0.50 cm in diameter. There was a small amount of non-shadowing density within the pylorus. The previously noted strongly shadowing densities are no longer present in the stomach. The pylorus appears patent at this time. The stomach walls appeared mildly thickened with intact wall layering, consistent with gastritis pattern. The duodenum and remaining small intestines are empty. There is formed stool in the colon.



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**Pancreas**

The left limb, body and right limb of the pancreas were visualized and found to be normal in size and shape. The pancreatic capsule was smooth, without deviation or expansion. The parenchyma was isoechoic to the surrounding mesentery. The pancreatic duct was normal in size and appearance. There was no evidence of discrete masses or inflammation.

**Other**

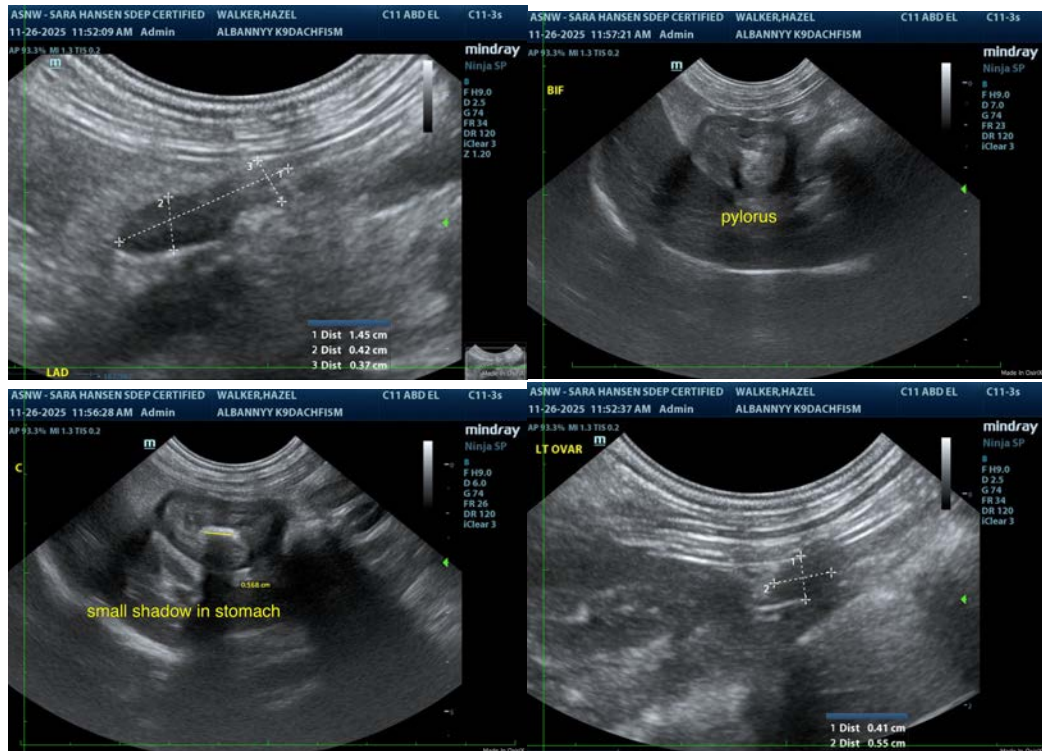
Both ovaries were visualized and appeared normal for this age and breed.

**ULTRASONOGRAPHIC FINDINGS**

- Gastric fluid and small amounts of foreign material.
- Gastritis.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

While there is a small amount of fluid in the stomach and very small densities, there is no visible obstruction or obstructive pattern at this time. What was previously in the stomach appears to have moved through the gastrointestinal tract and is likely in the colon. Continued treatment for gastritis is recommended.





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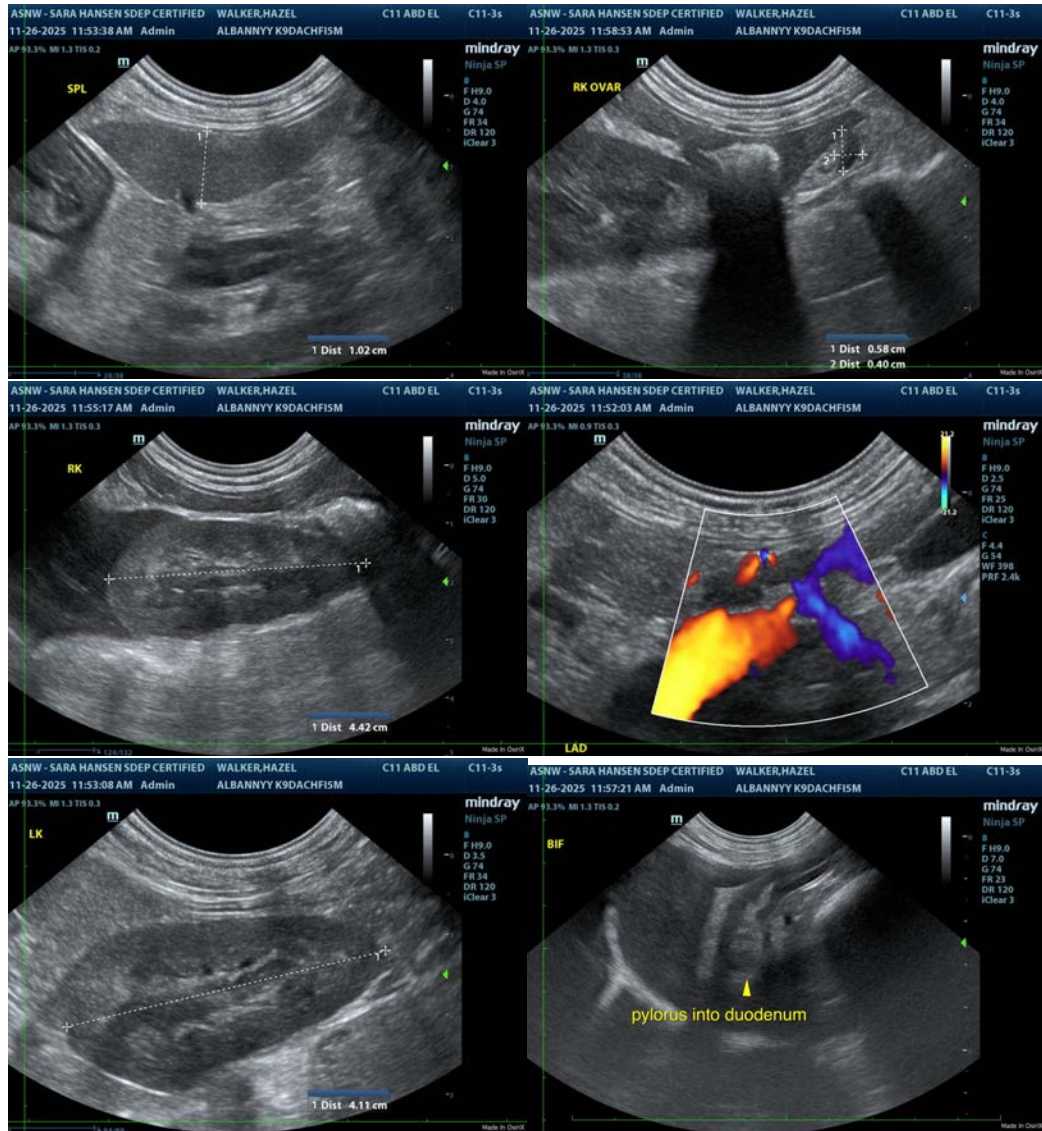
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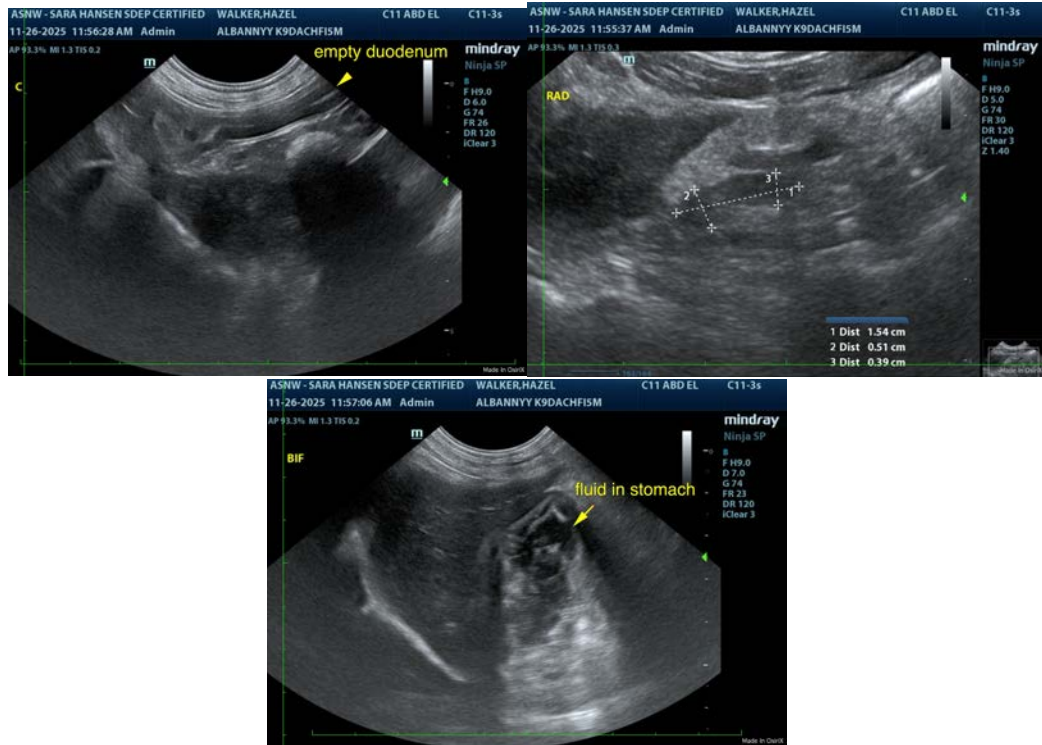
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Karen Ebersole, DVM, DABVP (Canine and Feline practice)  
 info@SonoPath.com