



PATIENT

Mara Barton

SPECIES

Canine

BREED

Jindo

SEX

FS

AGE

8 years

WEIGHT

25.3 kg

INTERPRETED BY

Karen Ebersole, DVM,
 DABVP (Canine and
 Feline)

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Governors Road AH

REFERRING VET

Dr. Farooq

INVOICE

10835

DATE

11/28/2025

PRESENTING CLINICAL SIGNS

Vomiting and severe diarrhea for a few days. Is now unable to keep down any food or water without vomiting. Lethargic and not interested in eating food or taking treats. Reactive on palpation of caudal abdomen; not sure if painful or doesn't like to be touched Current Medications MIRTAZAPINE, GABAPENTIN, DENAMARIN.

Abnormal PE/Chem/CBC/UA Results: ALP 20 (23 - 212 U/L), Rest WNL Anaplasma Positive, Anaplasma PCR Negative Radiographic Findings Soft tissue opacity in central dorsal area. Potential summation vs organo-megaly. Recent history of liver issues, but improved today.

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 bladder contents were anechoic with echogenic sediment, without visible discrete urolith formation. There was no visible inflammation in the bladder or urethra. The urethra was visualized to a distance of 2.0 cm beyond the cystourethral junction.

The iliac trifurcation was normal in structure and volume. There was normal vascular perfusion with no evidence of thrombus formation on doppler exam. There was no visible lymphadenopathy.

Both kidneys were normal in size with a mildly irregular capsule contour. There was a mild to moderate increase in cortical echogenicity. The corticomedullary junction was mildly indistinct. There was no pelvic dilation.

The left kidney measured 6.0 cm in length. The right kidney measured 5.9 cm in length.

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. The left adrenal measures 0.57 cm at the caudal pole and 0.48 cm at the cranial pole. The right adrenal measures 0.63 cm at the caudal pole and 1.38 cm at the cranial pole.

Spleen

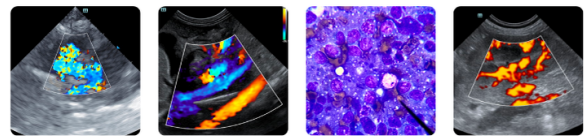
The spleen was normal in size and shape, with a smooth capsule contour. The parenchyma was finely textured and homogeneous. The vasculature showed good vascularity with power doppler.

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 size and shape, with echogenic, non-mineralized biliary sludge. The wall was normal thickness with no visible inflammation. The cystic duct and common bile ducts were normal in size with no evidence of obstruction.

Gastrointestinal



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The stomach and intestinal walls were diffusely thickened, with intact wall layering. Normal wall layer ratios were largely maintained. The mucosa was mildly hypoechoic with occasional mucosal speckling. There was a segmental to diffuse ileus pattern with mild luminal fluid accumulation. There was no visible obstruction, mass or foreign material.

The colon wall was diffusely thickened with maintained wall layering. The mucosal layer was moderately thickened, while the submucosal layer was echogenic and prominent. Non-formed to liquid luminal contents were present.

Pancreas

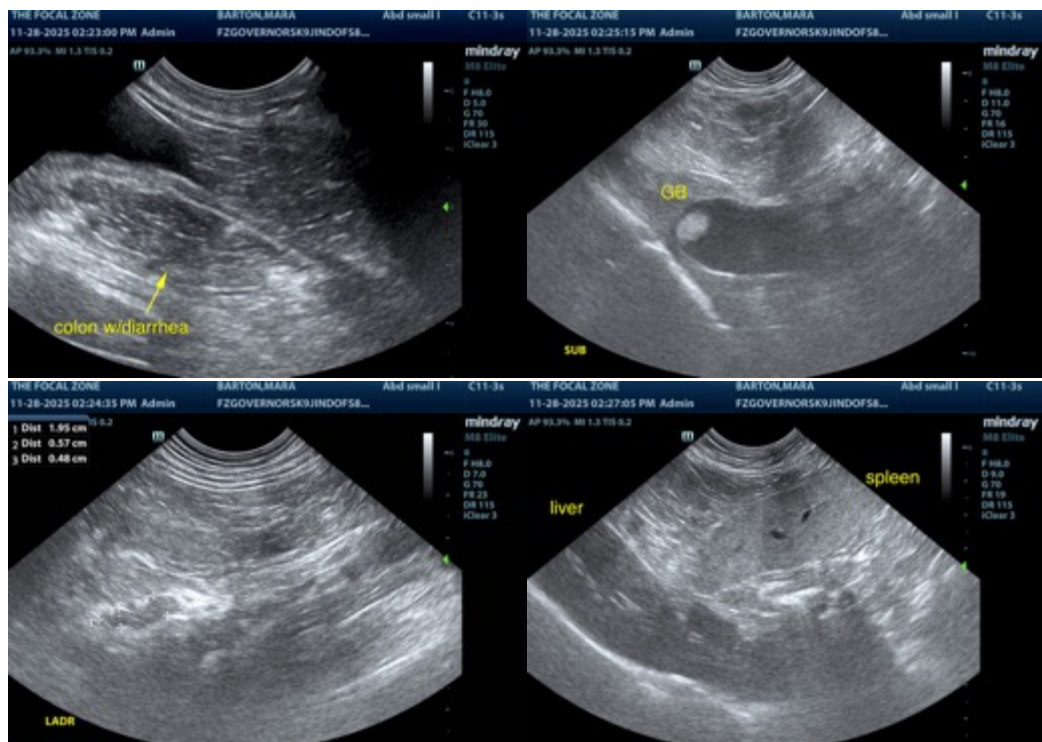
The left limb, body and right limb of the pancreas were visualized and found to be normal in size and shape. The pancreatic capsule was smooth, without deviation or expansion. The parenchyma was isoechoic to the surrounding mesentery. The pancreatic duct was normal in size and appearance. There was no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

ULTRASONOGRAPHIC FINDINGS

- Gastroenteritis.
- Colitis with diarrhea.
- Urinary bladder sediment, mild – correlate with urinalysis for clinical significance.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no evidence of a mass in the abdomen. The spleen overlapping the fluid filled colon may have appeared to be soft tissue density. Aggressive supportive care is recommended with fluid therapy, electrolyte management, and antiemetics.





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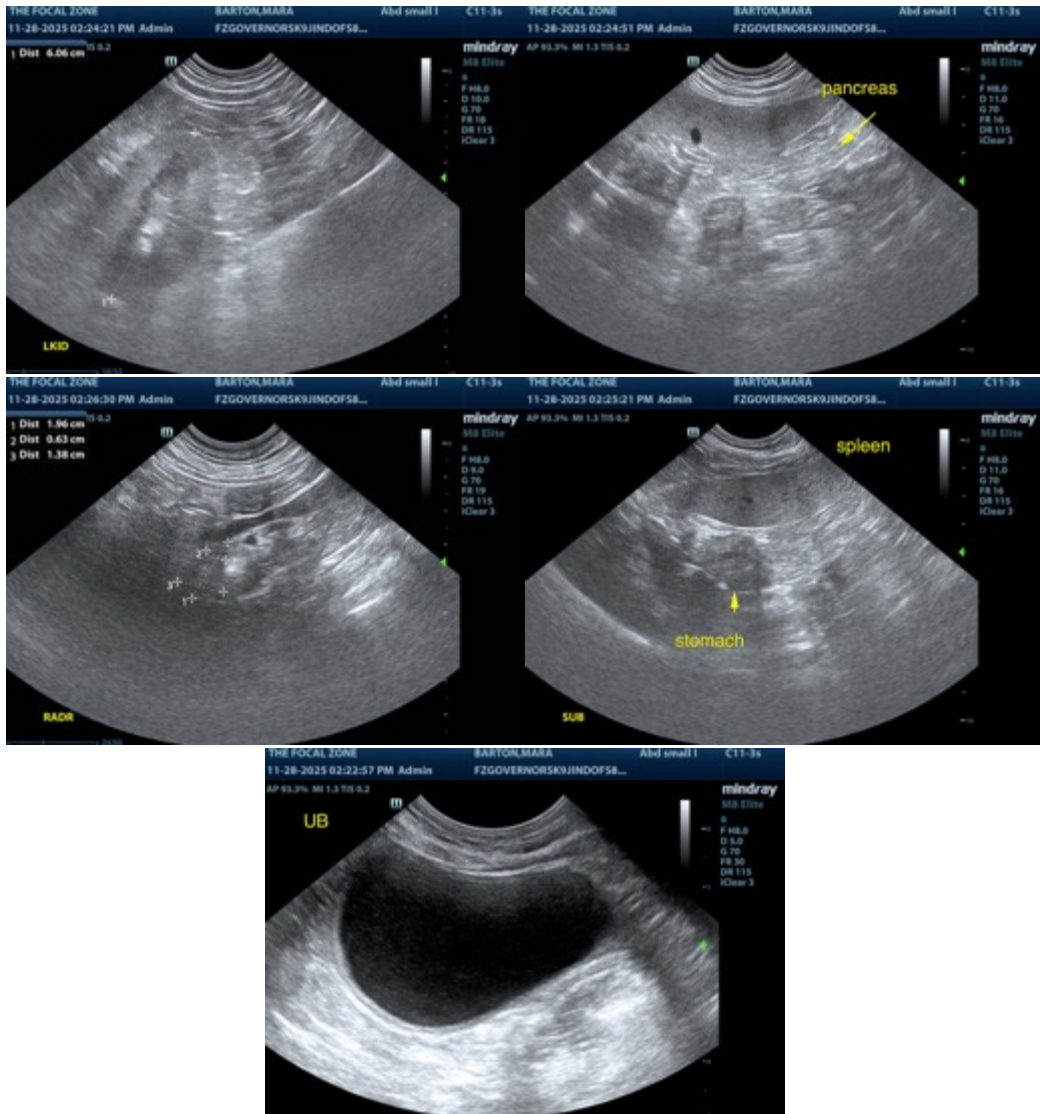
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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