

## PATIENT

Rusty Morgan

## SPECIES

Canine

## BREED

Poodle Mix

## SEX

MC

## AGE

11 years

## WEIGHT

14.9 kg

## INTERPRETED BY

Karen Ebersole, DVM,  
DABVP (Canine and  
Feline)

## IMAGING PERFORMED BY

Lindsay Powell, CVT

## HOSPITAL NAME

Hershey Animal  
Emergency Center

## REFERRING VET

Dr. Shally Gestelu

## INVOICE

10836

## DATE

11/28/2025

## PRESENTING CLINICAL SIGNS

Presents for 7 days history of hyporexia, progressed to anorexia 3 days ago. Vomited hot dog a few days ago. Was at rDVM 4 days ago where diagnosed with DM, not currently on treatments.

Abnormal PE/Chem/CBC/UA Results: Eyes: retracted globes, mucoid discharge medial canthus Oral Cavity: Mucous membranes pink/dry, CRT 4s, moderate tartar/gingival erythema Cardiovascular: pulses thready Abdominal: Pain with cranial palpation Integument: Skin tent significantly prolonged, numerous SQ masses abdomen and thighs rDVM BW 11/25: CBC 15.7, Neu 9.9 H, Mon 1.8 H, Plt 420 H Chem: 474 H, BUN 17, Creat 0.7, Na 140 L, K 5.3, Cl 102 L, ALT 165 H, CLP 364, AST 85 H, Tbili 0.1 Intake 11/28 2pm EPOC: pH 7.099 L, Bicarb 8.0 Ketones: 5.3 Chem15: Glu 649 H, Creat 2.9 H, BUN 70 H, Alb 4.3 H, ALT 245 H, ALP1,194 H, GGT 6, Tbili 1.0 H, Chol 451 H CBC: Hct 50, WBC 39.18 H, Neu 29.38\*H, bands susp, Lym 2.93\*, Mon 6.79\* H, Eos 0.01 L, Plt 565 H Pancreatic Lipase: >2,000 H Urinalysis & Sedivue: pending.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The bladder was small and minimally filled. The bladder walls were normally thickened due to lack of luminal contents. The visible trigone and pelvic urethra were normal in appearance. The urine was primarily anechoic without significant visible sediment.

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 moderate increase in cortical echogenicity. The corticomedullary junction was mildly indistinct. There were variably sized, non-obstructive medullary mineralization present without pelvic dilation.

The left kidney measured 5.3 cm in length. The right kidney measured 6.2 cm in length.

### Adrenal Glands

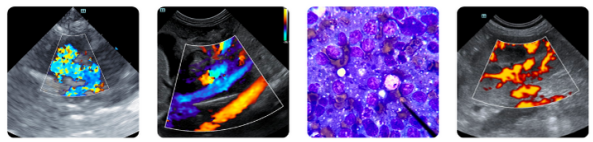
Both adrenal glands were normal in size and shape, with a smooth capsule contour. The parenchyma displayed normal echogenicity. There was no evidence of capsular expansion or pericapsular inflammation. There were no nodules or masses visible. Left adrenal measures 0.60 cm at the caudal pole and 0.58 cm at the cranial pole. Right adrenal measures 0.59 cm at the caudal pole and 0.87 cm at the cranial pole.

### Spleen

The spleen was normal in size and shape. The parenchyma was finely textured with variably sized, clearly demarcated, hyperechoic nodules diffusely through the spleen. These hyperechoic nodules were primarily subcapsular and perivascular in location. The appearance of the nodules is consistent with benign myelolipomas.

### Liver

The liver was subjectively increased in size with a smooth rounded capsule contour. The parenchyma was finely textured and diffusely hyperechoic. There was no evidence of distinct masses or nodules. The hepatic and portal veins were normal in size and structure, with no visible congestion.



**PATIENT**

Rusty Morgan

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.

**SPECIES**

Canine

**Gastrointestinal**

The stomach presented wall thickening secondary to echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. Mild gastric distension with primarily anechoic fluid was present. The small intestine displayed normal curvilinear patterns throughout. Subjectively normal wall thickness and layering was maintained. The visible colon wall was normal in thickness and layering.

**BREED**

Poodle Mix

**Pancreas**

**SEX**

MC

The pancreas was mildly to moderately enlarged in size. The capsule contour was mildly asymmetric and irregular. The parenchyma was hypoechoic to heterogeneous with mildly bright mesentery around it. There was no overt evidence of neoplasia.

**AGE**

11 years

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

14.9 kg

- Hepatomegaly with vacuolar hepatopathy pattern.
- Pancreatitis, moderate.
- Age related changes in both kidneys.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Aggressive supportive care for DKA and regulation of the diabetes is indicated. The liver pattern is most consistent with a vacuolar hepatopathy/endocrine hepatopathy, however, FNA would be required to confirm. There is no visible evidence of EHBDO currently. If the total bilirubin continued to increase, then further assessment and/or a recheck ultrasound would be needed.

**INTERPRETED BY**

Karen Ebersole, DVM,  
DABVP (Canine and  
Feline)

**IMAGING PERFORMED BY**

Lindsay Powell, CVT

**HOSPITAL NAME**

Hershey Animal  
Emergency Center

**REFERRING VET**

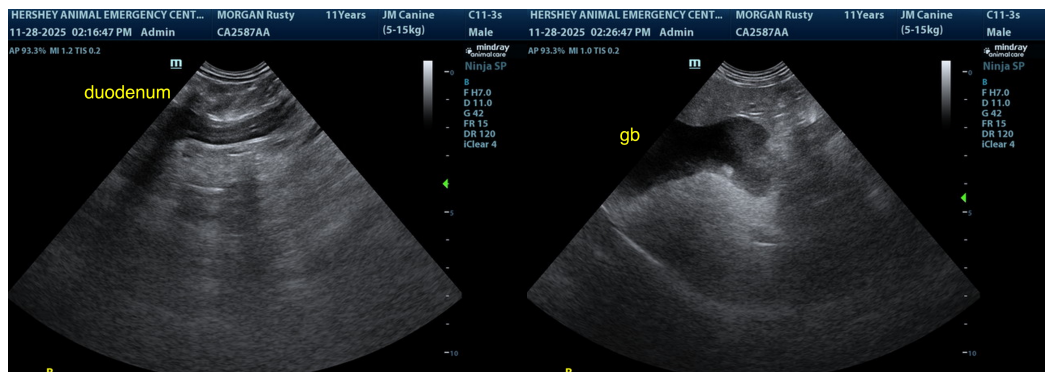
Dr. Shally Gestelu

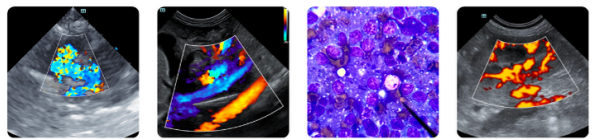
**INVOICE**

10836

**DATE**

11/28/2025





**PATIENT**

Rusty Morgan

**SPECIES**

Canine

**BREED**

Poodle Mix

**SEX**

MC

**AGE**

11 years

**WEIGHT**

14.9 kg

**INTERPRETED BY**

Karen Ebersole, DVM,  
DABVP (Canine and  
Feline)

**IMAGING  
PERFORMED BY**

Lindsay Powell, CVT

**HOSPITAL NAME**

Hershey Animal  
Emergency Center

**REFERRING VET**

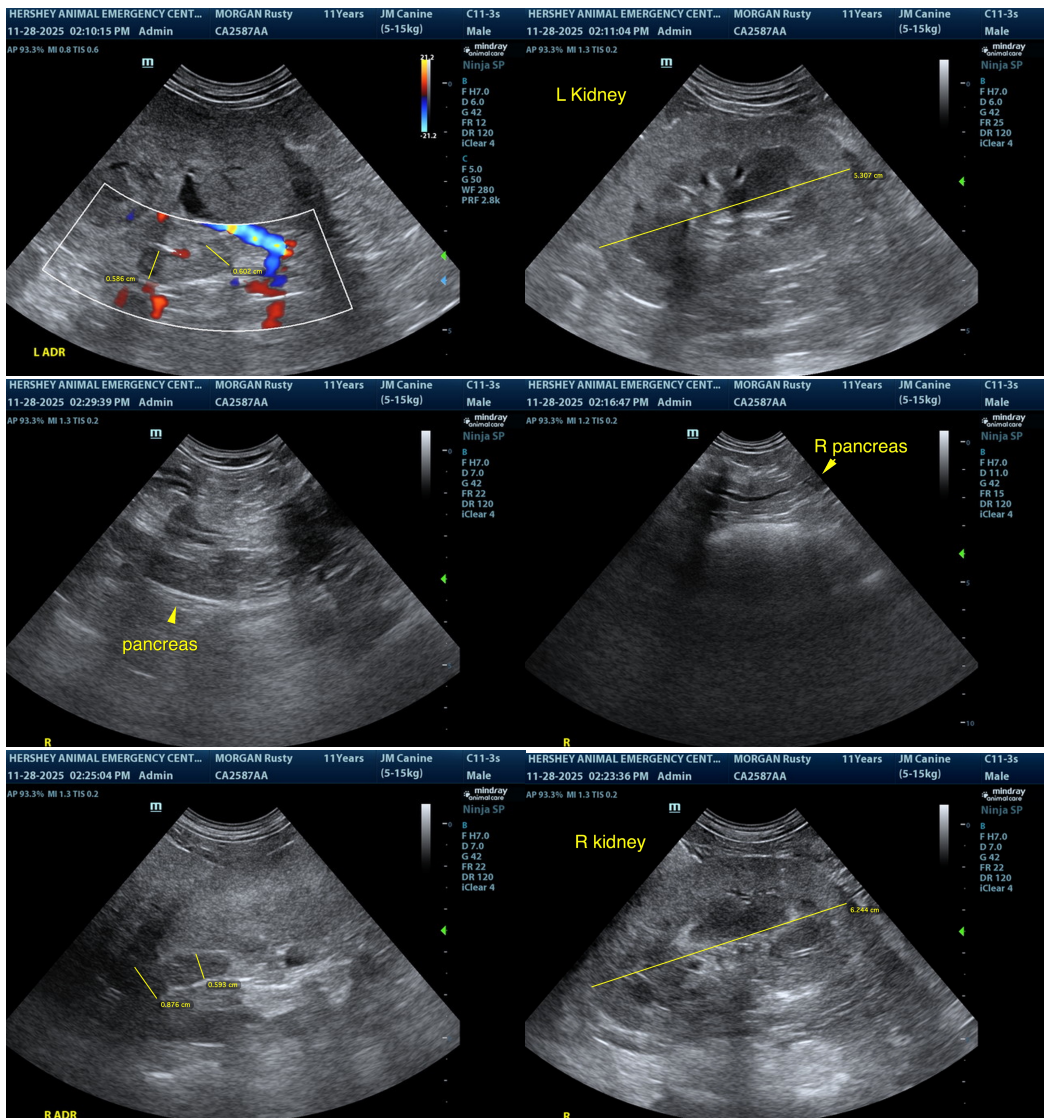
Dr. Shally Gestelu

**INVOICE**

10836

**DATE**

11/28/2025



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