



PATIENT

Baron Sloan

SPECIES

Canine

BREED

Doberman

SEX

Male, Intact

AGE

6/20/20

WEIGHT

35.5 kg.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(*Small Animal Internal
Medicine*)

**IMAGING
PERFORMED BY**

Andrea Nicastro, DVM,
Diplomate ACVIM
(*Small Animal Internal
Medicine*)

HOSPITAL NAME

Blue Pearl Mt Pleasant

REFERRING VET

Dr. Bianucci

INVOICE

13434

DATE

1/27/26

PRESENTING CLINICAL SIGNS

Pt was neutered today. The hematuria previously described had worsened since the original sonogram. Pt has been on Enrofloxacin and received a dose of Unison today.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

**This study was limited to the urinary system. There is a potential for pathology in organs that were not visualized.

Urinary System

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder is distended. A large amount of suspended echogenic debris is observed within the lumen. No cystic calculi are observed. The region of the trigone and the proximal urethra, visible to a depth of >5.5 cm, are normal.

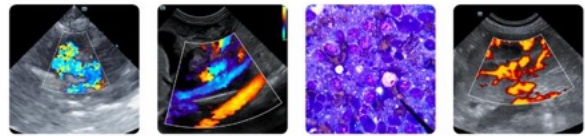
The prostate is enlarged (5.91 cm in width) with slightly irregular peripheral contours. The parenchyma is hyperechoic relative to surrounding omental fat and heterogeneous in appearance with numerous tiny, ill-defined cystic areas throughout the organ. In the left lobe, a 2.5 x 1.9 cm hypoechoic to anechoic lesion is visualized. On the right side, a 2.4 x 1.6 cm hypoechoic to anechoic lesion is seen. The prostatic urethra is not overtly dilated.

ULTRASONOGRAPHIC FINDINGS

- The prostate changes are similar to the previous sonogram and are most consistent with cystic benign prostatic hyperplasia with a cystic or abscessed lesion in each lobe. These lesions are similar in size compared to the previous sonogram.
- Urinary bladder debris

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

1. Due to the depth of the lesions within the prostate, aspiration for drainage and/or cultures would be difficult and would require heavy sedation.
2. If aspiration of the lesions is not pursued, continued antibiotic therapy with a recheck ultrasound in 1-2 months (or sooner if patient is not improving) can be considered to assess for improvement or worsening.



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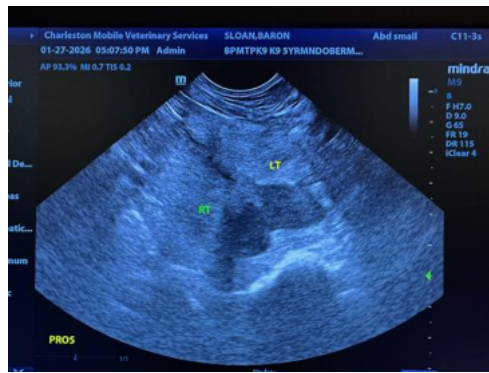
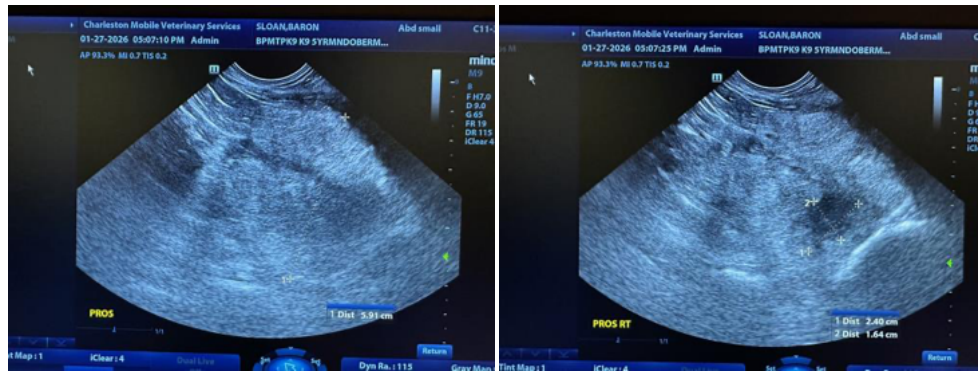
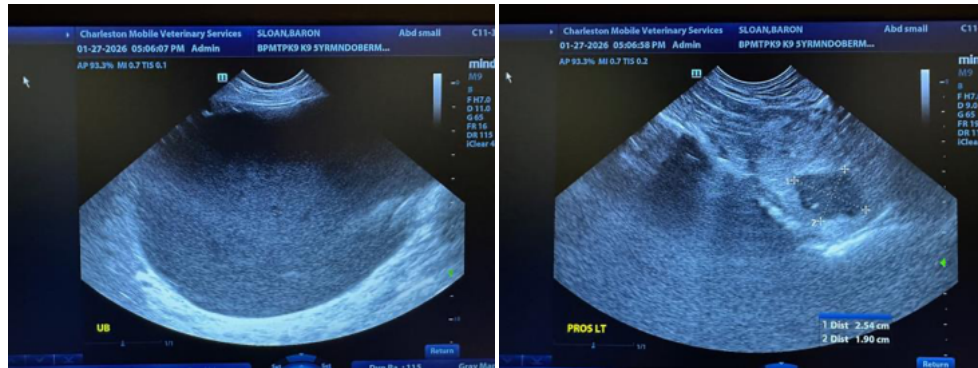
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
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