



## PATIENT PRESENTING CLINICAL SIGNS

Sebastian Domena

History: Presented as a referral for a combined echocardiogram and abdominal ultrasound to evaluate enlarged prostate and to evaluate a heart murmur to determine anesthesia risk prior to neutering.

## SPECIES

Abnormal PE/Chem/CBC/UA Results: PE a grade 3/6 murmur, prostatomegaly  
Bloodwork attached as supporting documents.

Canine

## BREED

Shih Tzu

### Urinary System

The urinary bladder, trigone, and visible pelvic urethra were of normal thickness. The ureters were not visible which is normal. There was normal wall layering with no masses, uroliths or abnormal thickening visualized. Urine was anechoic. No evidence of inflammatory or neoplastic changes were noted.

## SEX

Intact Male

The prostate is uniformly moderately enlarged and hyperechoic. No mineralization, evidence of masses or fluid accumulations consistent with cyst or abscess visualized.

## AGE

9

The kidneys have a smooth capsule with hazing of corticomedullary definition to the point of inability to determine cortical/medullary ratio. No evidence of pelvic dilation was present. The left 4.65 cm in length. The right kidney measured 5.18 cm in length.

## WEIGHT

14.6 lbs

### Adrenal Glands

Both adrenal glands were visualized and recognized as having normal shape, size (left 1.80 cm in length, 0.44 cm at the cranial pole, and 0.34 cm at the caudal pole), (right 1.33 cm in length, 0.33 cm at the cranial pole, and 0.46 cm at the caudal pole), position and echogenicity for this breed and age. The visible phrenic vasculature was unremarkable.

## INTERPRETED BY

Dr Brittany Sinclair,  
BVSc(hons), DACVECC

### Spleen

The spleen was normal with age-appropriate homogeneous parenchyma and a smooth capsule with normal splenic vasculature with no signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarct changes were noted.

## IMAGING PERFORMED BY

Gabriel Ferrer DVM

### Liver

The liver is subjectively normal in size with normal contours and structure. There is age-appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed.

## HOSPITAL NAME

Pulse Pet Ultrasound  
Services

Gall bladder is moderately distended with normal wall thickness and anechoic contents. Common bile duct is non-distended and tapers normally.

## REFERRING VET

Dr. Camacho

### Gastrointestinal

The stomach contains minimal luminal contents. It measures at a normal thickness of with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate. No masses or focal lesions were observed.

## INVOICE

22261

## DATE

12-12-25

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. There were no focal lesions consistent with obstruction or a mass effect observed.



**PATIENT**

Sebastian Domena

The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

**SPECIES**

Canine

**Pancreas**

The visible pancreas was observed to be largely isoechoic to surrounding omental fat.

**Lymph Nodes**

**BREED**

Shih Tzu

No clinically significant lymphadenopathy or abnormalities noted.

**Free Abdomen**

**SEX**

Intact Male

No masses or free fluid were noted.

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

9

- Prostatomegaly – BPH
- Aging renal changes

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**WEIGHT**

14.6 lbs

Prostatic changes are most consistent with benign prostatic hyperplasia. Fine needle aspirate could be considered to confirm and rule out infectious or neoplastic prostatitis – though this is not strongly suspected. Castration should be considered if causing a clinical problem such as hematuria, stranguria, urinary incontinence or tenesmus. Alternatively medical therapy with finasteride, Progestins (Megestrol acetate, Medroxyprogesterone), Deslorelin implant could be attempted.

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Services

**REFERRING VET**

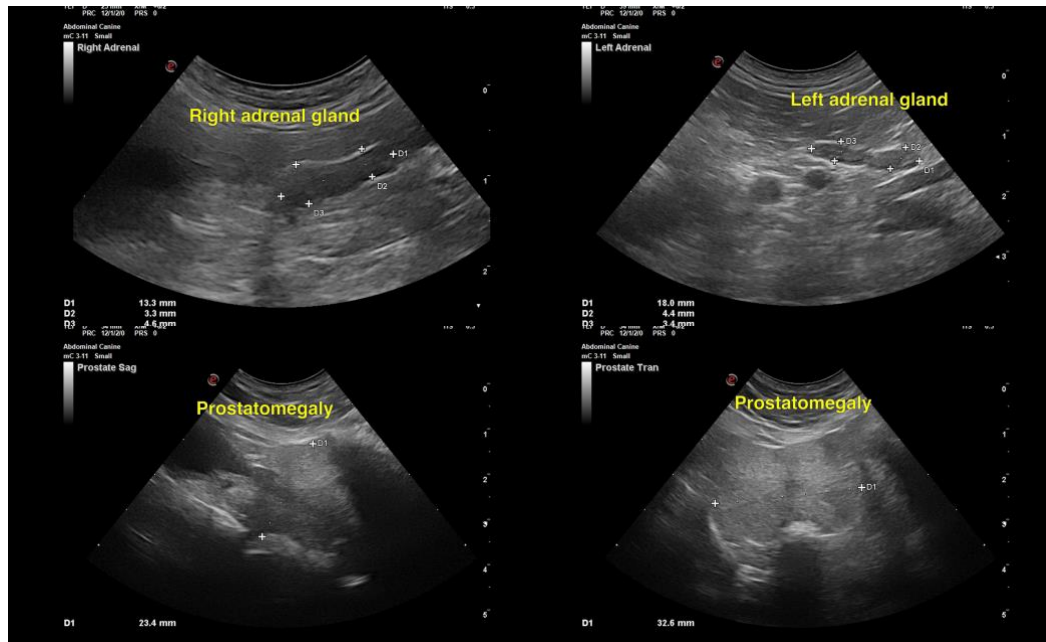
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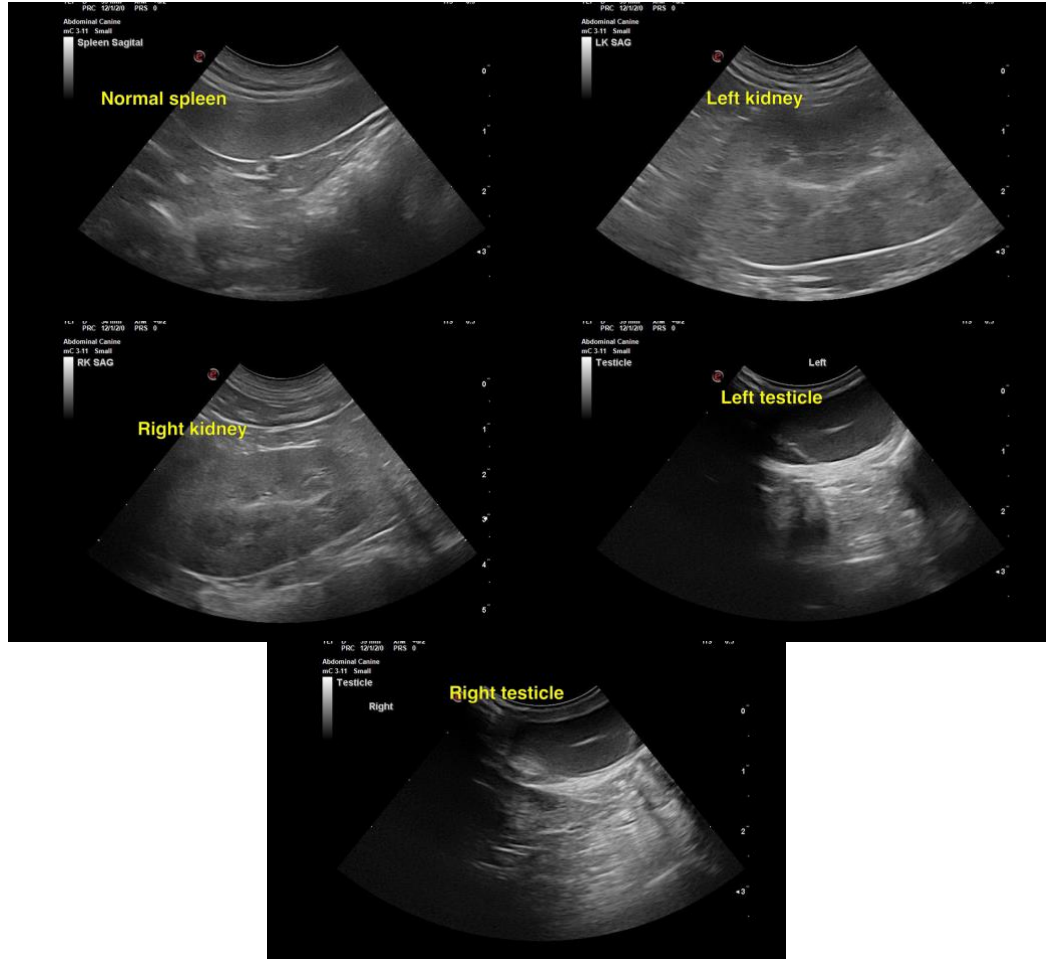
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Dr Brittany Sinclair, BVSc(hons), DACVECC  
info@SonoPath.com