



PATIENT

Taco Blumenthal

SPECIES

Canine

BREED

Rottweiler

SEX

Male

AGE

4 years

WEIGHT

105.7 lbs

PRESENTING CLINICAL SIGNS

History: u/s and rads: rads taken due to recent LH lameness. no drawer sign elicited. growls on hip extension. chem/CBC WNL, anaplasma positive but pcr negative and CBC WNL. also had hematuria and persistent pyuria. prostate enlarged on ultrasound. pet is a 4 yr old ROTW MI.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **prostate** was uniformly enlarged with lobar swelling appeared to impinge upon the urethra and mildly deviate the descending colon. The prostatic tissue was hyperechoic containing focal areas of decreased echogenicity. These changes are suggestive of either chronic inflammatory episodes, benign cystic pathology or both. Underlying neoplasia cannot be completely ruled-out but is lower on the differential list. This presentation is most consistent with benign prostatic hyperplasia with possible active prostatitis. Neutering or off-label Finasteride (Propecia) (0.1-0.5 mg/kg Sid) treatment is indicated +/- FNA or prostatic wash cytology and culture. Edema lines were noted. This is suggestive for prostatitis. The prostate measured 5.5 cm with mild deviation of the descending colon.

ULTRASONOGRAPHIC FINDINGS

BPH prostatitis pattern.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Neutering is strongly encouraged in this patient. If neutering is absolutely not an option then the following can be considered.

Finasteride at 1 mg/kg/day can be utilized as an off-label approach to reducing prostatic size in BPH cases. Coverage for prostatitis would also likely be appropriate with Fluoroquinolone/Baytril or similar. A recheck sonogram is recommended in 3-4 weeks with reassessment of the urinalysis and evaluation of any inflammatory sediment.

IMAGING PERFORMED BY

Dr. Salas

HOSPITAL NAME

Tenaflly VC

REFERRING VET

Dr. Salas

INVOICE

94377

DATE

12/7/21



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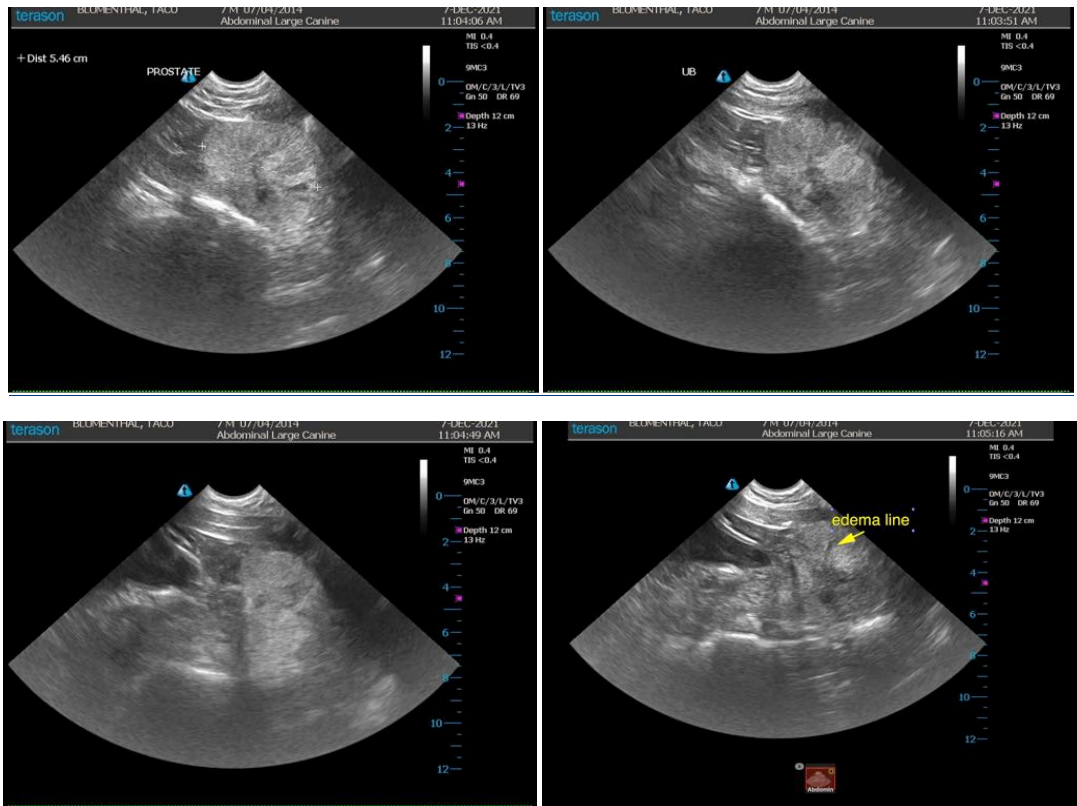
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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