



PATIENT

Obe Lambert

SPECIES

Canine

BREED

Labrador Retriever

SEX

Male

AGE

5 Years 11 Months

WEIGHT

75 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Raul Casas

HOSPITAL NAME

State Ave Vet Clinic

REFERRING VET

Dr. Raul Casas

INVOICE

43573

DATE

6/29/23

PRESENTING CLINICAL SIGNS

Urination issues, O has it has been happening for a while O has been seeing blood on the floor, has been dribbling urine, straining to urinate O says bleeding will stop and then start randomly O said P has been more tired but will still go out and play E/D normal PE BAR; friendly; p/m mm; CRT 1-2s; no mur/arrh; no abn lung sounds; no abd dist; no pain or abns on abd palp; eyes, ears, LNs WNL; ambulating normally; BCS-5/9; penis- no mass, non-painful; symmetrical prostate, non-painful; rectal- with normal fecal material UA: Blood / Hemoglobin- 10 Ery/ μ L, Urobilinogen: 4 mg/dL, White Blood Cells: 2 /HPF, Red Blood Cells: 4 /HPF, suspected rod bac

LIMITED ULTRASONOGRAPHIC EXAMINATION

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 were noted. Ureteral papillae were normal.

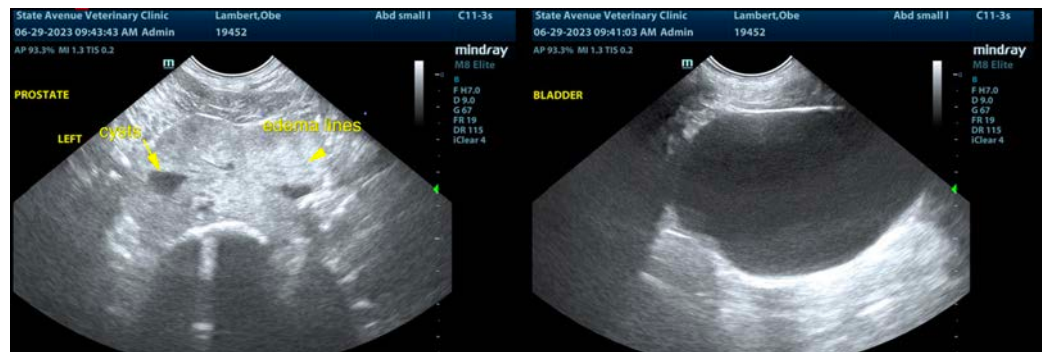
The **prostate** was uniformly enlarged (6.0 cm in width) with lobar swelling appeared to impinge upon the urethra and mildly deviate the descending colon. Edema lines noted in the prostate. Multiple cysts noted with possible abscessation, measuring up to 1.5 cm. The prostatic tissue was hyperechoic 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.

ULTRASONOGRAPHIC FINDINGS

- Prostatitis/BPH with potential abscessation

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ultrasound guided drainage, cytology and culture of the prostatic cysts and parenchyma recommended with neutering. Enrofloxacin recommended over a 3-4 week period with recheck sonogram recommended at that time.





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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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

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