



## PATIENT

Fiddler Goodfellow

## SPECIES

Canine

## BREED

German Shorthair  
Pointer

## SEX

Male

## AGE

11 Years

## WEIGHT

28.5 Pounds

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Evan Bell

## HOSPITAL NAME

Cedarview AH

## REFERRING VET

Evan Bell

## INVOICE

12826

## DATE

8/27/21

## PRESENTING CLINICAL SIGNS

History: Recent history of collection with blood in semen rich fraction (F2 but presumed F1 and F2). L testicle very firm on palpation, R normal but small. Epididymis normal (slightly larger R>L). Moderate sized prostate on palpation. Symmetrical and non-painful.

Abnormal PE/Chem/CBC/UA Results: CBC/Chem/T4 - pending FNA of prostate, and both testicles pending.

## LIMITED ULTRASONOGRAPHIC EXAMINATION

The prostate was enlarged in this patient and echogenic remodeling was noted with echogenic cyst (measuring 1.2 cm and 1.03 cm). The prostate measured 5.7 cm in width. Edema lines were noted suggestive for prostatitis. The right testicle revealed a heterogeneous echogenic mass, measuring 3.1 cm x 2.4 cm. The left testicle was largely uniform with slight hyperechoic nodule of 4.0 mm.

## ULTRASONOGRAPHIC FINDINGS

- Right testicular mass
- Left testicular nodule
- Prostatitis pattern

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The left testicular nodule is likely benign; however, the right testicular mass is concerning. Chronic prostatitis/BPH pattern with possible abscessations versus cyst. Drainage of the cyst and culture indicated. Neutering strongly recommended in this patient given primarily the right testicular mass. If neutering is absolutely not an option, the right testicular mass should be monitored carefully for metastatic disease and growth as well as complications such as necrosis or testicular vascular events. Iliac lymph node imaging also indicated.

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.





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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.

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