

**DATE PRESENTING CLINICAL SIGNS**

3/8/22 Enlarged prostate and ongoing urinary tract infection.

PATIENT

Walter Rockhill

Current Medications: Clavamox 12.8mg/kg BID 7 days. Swapped to Baytril, started 2/17/22: 3.48mg/kg BID 5 days. Plan to run culture if infection present at recheck.

Lab Results: USG 1.050, pH 9.0, 500 Leuk, WBC 17/hpf, rods present. Previously UA showed significant blood and inflammation as well as cocci present, but findings and CS have improved on the Clavamox.

Date of Previous IntraPet Ultrasound: No previous.

SPECIES

Canine

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

BREED

Golden Retriever

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder is moderately distended with anechoic urine. The Bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

SEX

Intact Male

The prostate is large in size (5.07 cm x 3.81 cm) but has a regular shape with smooth external margins. The parenchyma is heterogenous but no discrete focal lesions are present. The prostatic urethra appears normal with no evidence of irregularity, invasion, mass effect or calculi.

AGE

11/7/17

The left kidney has a normal shape and size (6.23 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

86 Pounds

The right kidney has a normal shape and size (6.71 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

Other

The testicles are visualized and appear within normal limits.

IMAGING PERFORMED BY

Rachel Brilhart RDMS

A prominent sublumbar lymph node is visualized measuring 1.34 cm x 3.51 cm.

ULTRASONOGRAPHIC FINDINGS

- Large, hyperechoic prostate – findings are most consistent with benign prostatic hypertrophy +/- prostatitis. No focal lesions visualized.
- Prominent sublumbar lymph node – likely reactive, but neoplastic change cannot be 100% excluded.

HOSPITAL NAME

Greenbrier Vet Clinic

REFERRING VET

Dr. Whitfield

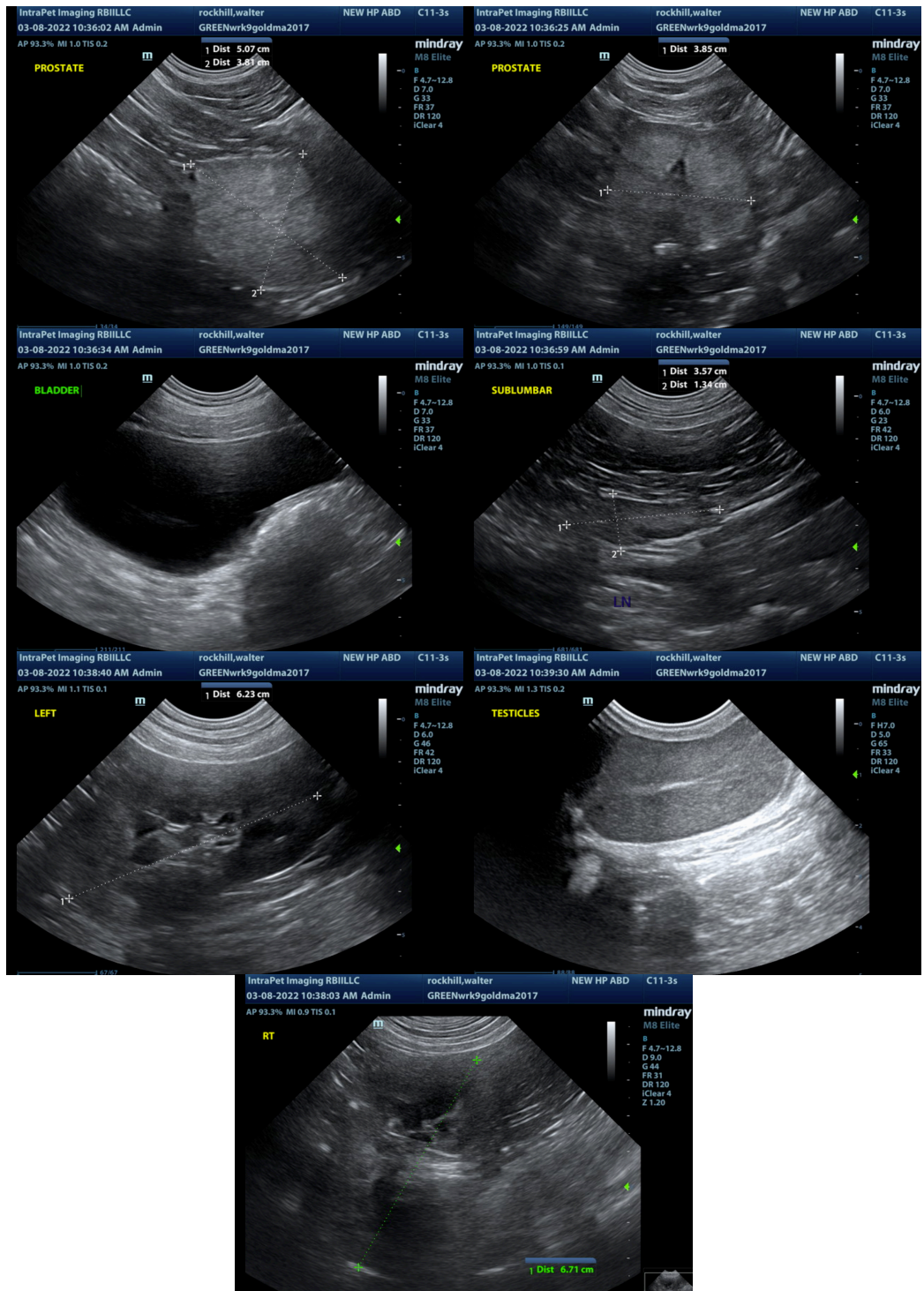
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There are no focal lesions associated with the prostate, and changes are most consistent with benign prostatic hypertrophy and likely prostatitis. Recommend urinalysis and culture, treatment based on sensitivity results, and long-term with neutering. Culture should be performed during therapy, and again approximately one week after cessation of antibiotic (I typically treat these one month post neutering).

INVOICE

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The sublumbar lymph node is prominent. This is likely reactive, but neoplastic change cannot be excluded as a possibility. Options would include rechecking this lesion post neutering (4-8 weeks post neutering?), or you could consider a fine needle aspirate of the prostate prior to castration.



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.

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