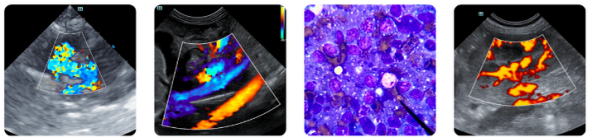

PATIENT

Clyde Skelton

SPECIES

Canine

BREED

Great Dane

SEX

Male

AGE

6

WEIGHT

68 kgs

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

IMAGING PERFORMED BY

Dr. Caroline Tan

HOSPITAL NAME

Castleridge Vet Cinic

REFERRING VET

Dr. Lynn Gratz

INVOICE

12908

DATE

12/10/25

PRESENTING CLINICAL SIGNS

History: Attending reports “Blood from penis after urinating off & on November 27th, not straining to urinate. Intact male - NAF on testicles, dog would not allow for prostate exam. U/A sent - free catch. SG 1.045, Ph 6 1+ protein, CaOx crystals (21-50/hpf), no hematuria. Dog was placed on Enrofloxacin at the time of exam. No VD. Eating well. BAR

Abnormal PE/Chem/CBC/UA Results: No blood work noted.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

The prostate was enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic without parenchymal mineralization. The prostate measured 6.3 cm in diameter. Intermittent, primarily small, non-disruptive, anechoic, thinly walled parenchyma cysts were present.

The left and right testicles presented sonographically normal.

The area of the aortic trifurcation was free of pathology.

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 8.5 cm in length. The right kidney measured 8.0 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.77 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.72 cm width at the caudal pole.

Spleen

The spleen was mildly enlarged in size with mild folding likely secondary to sedation. The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted. No evidence of neoplastic criteria present.

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Liver

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.

Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

The area of the pancreas was sonographically normal.

Free Abdomen

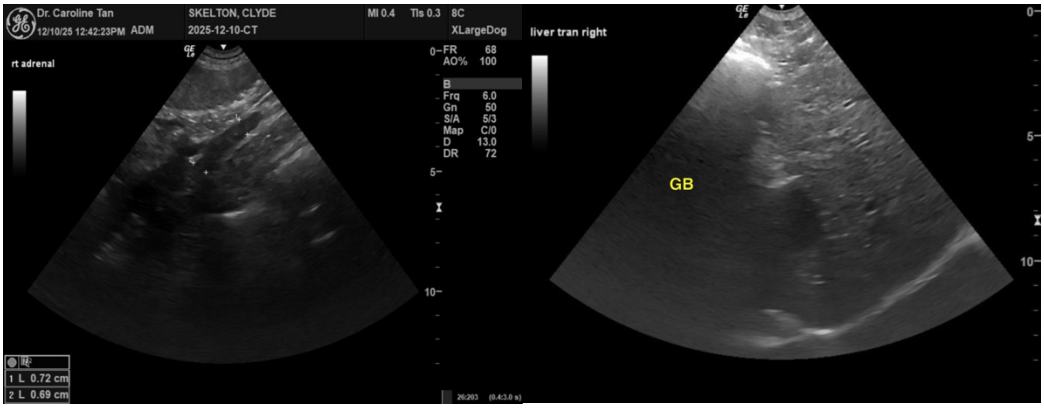
No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Probable benign prostatic hyperplasia patter with prostatic cysts, mild potential for prostatitis
- Normal urinary bladder
- Mild splenomegaly with folding – likely secondary to sedation

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Prostatic sampling either via ultrasound guided FNA or prostatic wash for cytology and +/- C/S required for further clarification. No evidence of prostatic or lower urinary tract neoplastic criteria. Neutering with empirical therapy for prostatitis and sonographic monitoring of prostatic involution is recommended.



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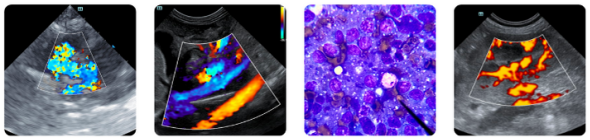

Clinical Sonography & Telecytology
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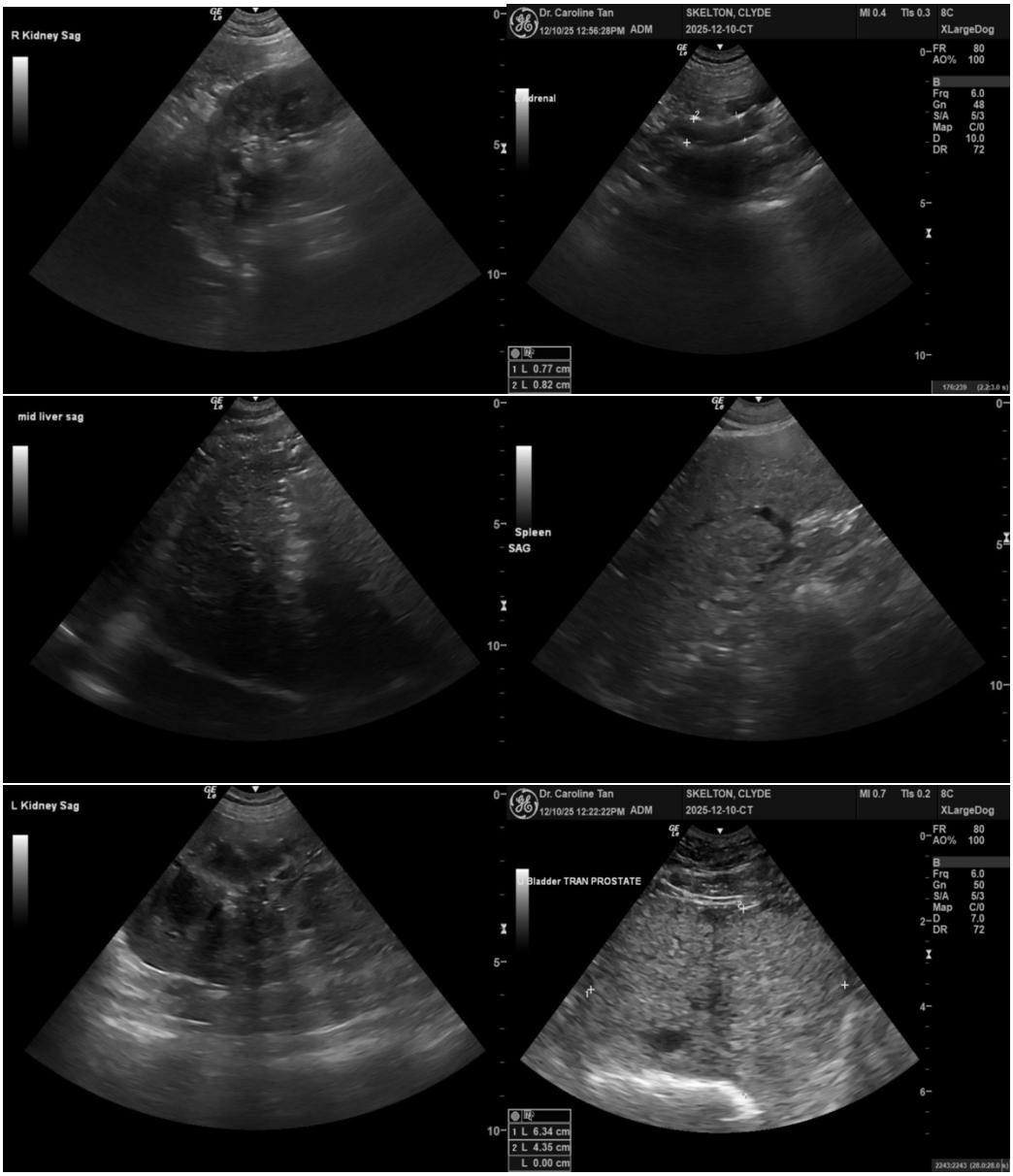
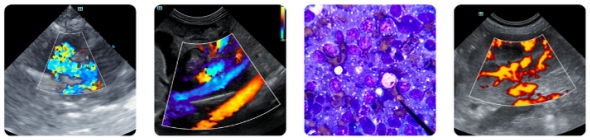


The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@sonopath.com



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