



PATIENT

Hunter Butz

SPECIES

Canine

BREED

Beagle Mix

SEX

Male

AGE

15Y

WEIGHT

24lbs

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

IMAGING PERFORMED BY

Jen Amidon

HOSPITAL NAME

The Pet Hospital of
Stratford

REFERRING VET

Dr Giuliani

INVOICE

74559

DATE

4-13-26

PRESENTING CLINICAL SIGNS

Pt presented for not eating for almost a week. O noted is drinking/urinating more.
Pt went to ER, prostate was enlarged.

Today on PE: enlarged, asymmetrical, painful prostate, rt side larger than left. While getting urine, noted blood in urine. O has not seen any at home.

Abnormal PE/Chem/CBC/UA Results: cbc/chem/ua pending

RADIOGRAPHIC STUDY OF THE ABDOMEN

Right/left lateral and ventrodorsal views of the abdomen totaling 4 images available for review.

RADIOGRAPHIC FINDINGS

The prostate is asymmetrically enlarged measuring approximately 6.0 x 7.5 cm. The prostate is uniformly soft tissue opaque. No evidence of mineralization is identified. The prostate occupies approximately 85% of the pelvic inlet height causing dorsal displacement of the colon. No evidence of sublumbar lymphadenomegaly or mass effect is seen. No aggressive osseous changes of the pelvis or lumbar spine are noted.

The serosal detail is preserved.

The remainder of the abdominal viscera present within normal limits on radiographic evaluation.

RADIOGRAPHIC DIAGNOSIS

- Marked asymmetric prostatomegaly.
- No radiographic evidence of mineralized prostatic neoplasia or metastatic disease at this time.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

Differential diagnosis includes benign or complex prostatic hyperplasia, prostatitis/prostatic abscessation, prostatic neoplasia, cystic prostatic disease, and less likely paraprostatic mass mimicking prostatic enlargement. Clinically significant prostatic disease cannot be ruled out based on the degree of enlargement and asymmetry. The preserved serosal detail argues against regional inflammation or effusion at this stage.

Abdominal ultrasound is recommended for further characterization of the prostatic enlargement and prostatic sampling by means of FNA, biopsy, or prostatic wash for cytology/histopathology and culture. Urinalysis and urine culture are recommended as well if not performed already. Rule out other pathology in the abdomen.



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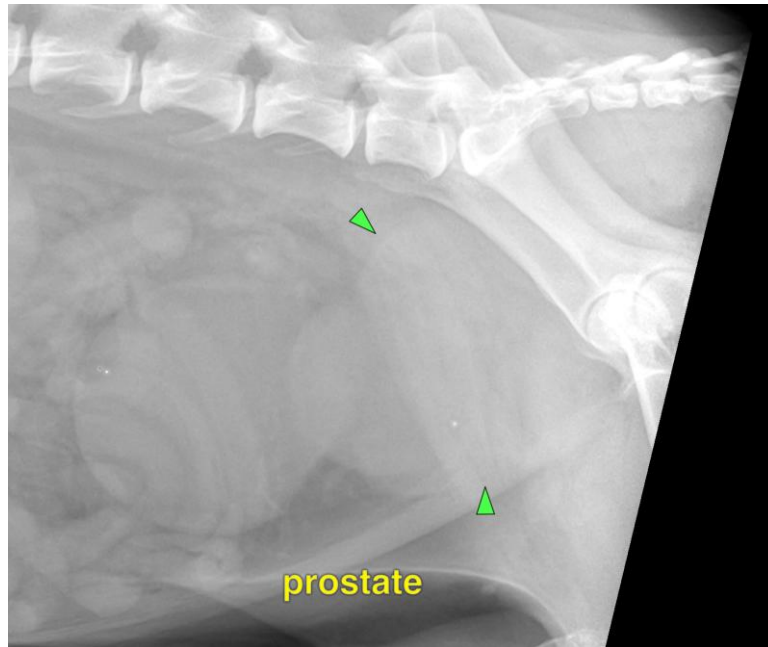
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Nele Eley (Ondreka), DVM, Dr. med. vet., DipECVDI
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