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Clinical Sonography & Telecytology
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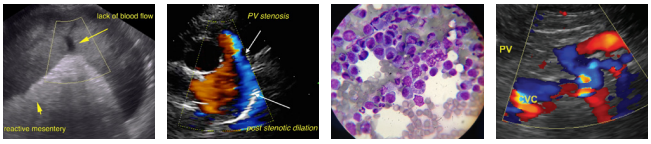

DATE

10/15/21

INTERPRETED BY

L.D. McGill, DVM, Ph.D, DACVP

PATIENT

Mya Smarella

SPECIES

Canine

BREED

Pyrenees X

SEX

Female Spayed

AGE

12y

WEIGHT

83.4 lbs

HOSPITAL NAME

Ruidoso Animal Clinic

REFERRING VET

Dr. Botkin

INVOICE NUMBER

613

PRESENTING CLINICAL SIGNS

Several week hx of progressive hindend weakness and PU/PD.
Severe hypercalcemia noted on BW (parathyroid gland independent based on MSU hypercalcemia of malignancy panel). PE reveals large firm mass associated with L AG, extends 6-8 cm cranially along L rectal wall. No pulmonary metastasis noted on thoracic radiographs. FNA obtained.

CYTOLOGY SUBMISSION

Anal sac region

OBSERVATIONS

Anal sac region: Submitted our 2 excellent videos and several images of cells collected from the anal sac region on Mya. The cellularity consists of massive numbers of neutrophils and several packets of epithelial cells. The neutrophils with scattered macrophages are associated with some bacteria. The cells of concern are packets of epithelial cells that are piled upon each other with prominent nuclei that are demonstrating euchromatic nuclei with minimal cytoplasm. This cellularity is consistent with a proliferative process commonly identified in the perianal region.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Anal sac region - Consistent with anal sac apocrine gland carcinoma with secondary chronic severe suppurative inflammation

COMMENTS

The cellularity in the collection demonstrates epithelial cells that are very consistent with apocrine gland carcinoma of the anal sac region. These carcinomas will commonly be very aggressive and infiltrate aggressively and even metastasize early. These tumor cells often cause hypercalcemia. There is extensive inflammation occurring secondarily with bacterial infection. This causes concern about the potential of metastasis and other infections. Evaluation of the internal iliac lymph node for metastatic sites is encouraged. If there are metastatic sites to that location, then an unfavorable prognosis is warranted. Other tissues may be involved at this time as well. With the cells and inflammation, and a guarded to unfavorable prognosis is warranted.

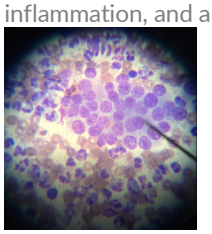

Image shows a packet of carcinoma cells surrounded by neutrophils and some bacteria in the background of the collection from Mya. The carcinoma cells are classical for anal sac apocrine glandular carcinoma.

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.

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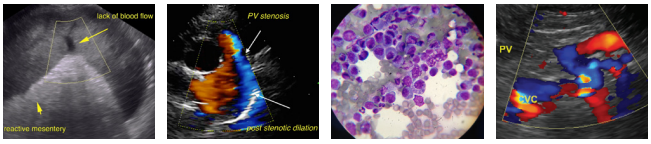

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