



PATIENT

Cooper Carabillo

SPECIES

Canine

BREED

German Shepherd

SEX

Neutered male

AGE

11 years

WEIGHT

86 lbs

INTERPRETED BY

Dr. Lawrence McGill,
DVM, Ph.D., Diplomate,
ACVP

IMAGING PERFORMED BY

Karen Ebersole, DVM,
DABVP (Canine/Feline
Practice)

HOSPITAL NAME

Scanvet

REFERRING VET

Dr. Bennett

INVOICE

71871

DATE

2/24/26

PRESENTING CLINICAL SIGNS

- Mass found on rectal exam. AUS done today and FNA of perineal mass
- PE: L perineal mass, firm, SQ, irregular. 2 small ulcerated lesions on the skin over it. AUS: L internal iliac lymphadenopathy - irregular, hypoechoic LN, loss of normal shape and structure. Rest of AUS - normal geriatric abdomen. US of perineal mass - hypoechoic to mildly heterogeneous, highly vascular on power doppler exam with adjacent inflammation.

CYTOLOGY SUBMISSION

FNA of the perianal mass was submitted

OBSERVATIONS

Perianal mass: Submitted are 5 excellent videos of excellent collections of cells from the perianal mass on Cooper. The cellularity is rather consistent through all of the videos. There is an image of the gross lesion but the cellularity is quite prominent on the videos. The cells are aggregated with indistinct cytoplasmic borders in many of the cells. Where there are cells with cytoplasm, they have a bluish gray color. There are large numbers of naked nuclei in the surrounding collections of cells within red blood cells. The aggregated cells demonstrate prominent anisocytosis and anisokaryosis with scattered mitotic figures. There are large fields of these cells.

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

Perianal mass - Large numbers of epithelial cells consistent with anal sac apocrine gland carcinoma.

COMMENTS

The cellularity in this collection is characteristic of an anal sac apocrine gland carcinoma. As you well know, these tumors metastasize early and thus the lymph node very likely contains a metastatic cellularity from this tumor. These tumors often cause hypercalcemia in affected individuals. Wide excision and excision of the lymph node may be beneficial in prolonging life in Cooper. My concern is that metastasis may have gone past the lymph node and thus an unfavorable prognosis is warranted in my opinion. Consultation with an oncologist may be beneficial to suggest another source of therapy.



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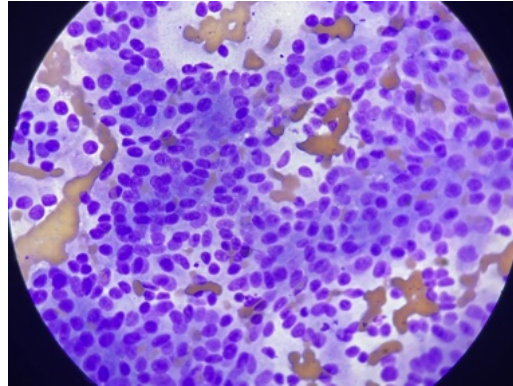
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CYTOLOGY IMAGE



This is an image of a field of tumor cells. Note the prominent anisokaryosis and anisocytosis of the tumor cells with indistinct cytoplasmic borders in the sample collected from Cooper.

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.

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

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