



PATIENT	PRESENTING CLINICAL SIGNS
Cooper Seibenlist	Owner noticed "butt bulge" and deviated stool for month or 2.... left perineal mass 6-8 cm top to bottom and perhaps 4cm wide and extending est 4-6 cm rostrally; typical of and presumed to be anal sac carcinoma
SPECIES	Abnormal PE/Chem/CBC/UA Results: Hypercalcemia Current Medications Landt
Canine	Calcium 14.2
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Labrador Retriever	Urinary System
SEX	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Minor nondependent particulate sediment was present which may indicate mild cellular debris / protein, crystalline debris, or mucus. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.
MN	
AGE	The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture.
8 yrs	A solitary, enlarged, medial iliac lymph node exhibiting homogeneous parenchyma and without evidence of perilymphatic reactivity was present in the area of the iliac trifurcation, measuring 3.5 cm x 2.0 cm.
WEIGHT	Normal size and margination were 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 6.4 cm in length. The right kidney measured 5.5 cm in length.
66 lbs.	Adrenal Glands
INTERPRETED BY	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.65 cm width at the caudal pole and 0.85 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.59 cm width at the caudal pole.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Spleen
IMAGING PERFORMED BY	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.
Sara Hansen	
HOSPITAL NAME	
Amazon Park AC	
REFERRING VET	
Dr. Heyward	
INVOICE	
14775	
DATE	
8/31/22	



PATIENT

Liver/ Gallbladder

Cooper Seibenlist

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 content with minor luminal debris which is incidental. The cystic and common bile ducts were normal.

SPECIES

Canine

BREED

Labrador Retriever

Gastrointestinal

SEX

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.

MN

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.

AGE

8 yrs

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

Pancreas

WEIGHT

66 lbs.

The parenchyma of the left limb, body, and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease were evident.

INTERPRETED BY

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

Free Abdomen

No omental masses, omental lymphadenopathy, or evidence of peritoneal effusion were noted.

**IMAGING
PERFORMED BY**

Sara Hansen

ULTRASONOGRAPHIC FINDINGS

- Solitary medial iliac lymphadenopathy
- Mild urinary bladder sediment
- Otherwise, sonographically normal abdomen

HOSPITAL NAME

Amazon Park AC

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Dr. Heyward

Although sampling is required for further assessment, the solitary medial iliac lymph node exhibiting abnormal width: length ratio (>0.5), is suggestive of neoplastic or metastatic lymphadenopathy, given the presence of the presumed neoplastic anal sac mass. No other additional evidence of intraabdominal or retroperitoneal metastasis was noted.

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Accessibility of the medial iliac lymph node for ultrasound-guided FNA may be limited given the patient size and lymph node depth. However, if accessible, ultrasound-guided FNA of the medial iliac lymph node in conjunction with anal sac mass sampling would be recommended for additional staging. If FNA is not possible, sonographic monitoring of the medial iliac lymphadenopathy for evidence of progression or additional lymphadenopathy based on oncology recommendations is recommended. Three-view chest radiographs are suggested if not done.



PATIENT

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SPECIES

Canine

BREED

Labrador Retriever

SEX

MN

AGE

8 yrs

WEIGHT

66 lbs.

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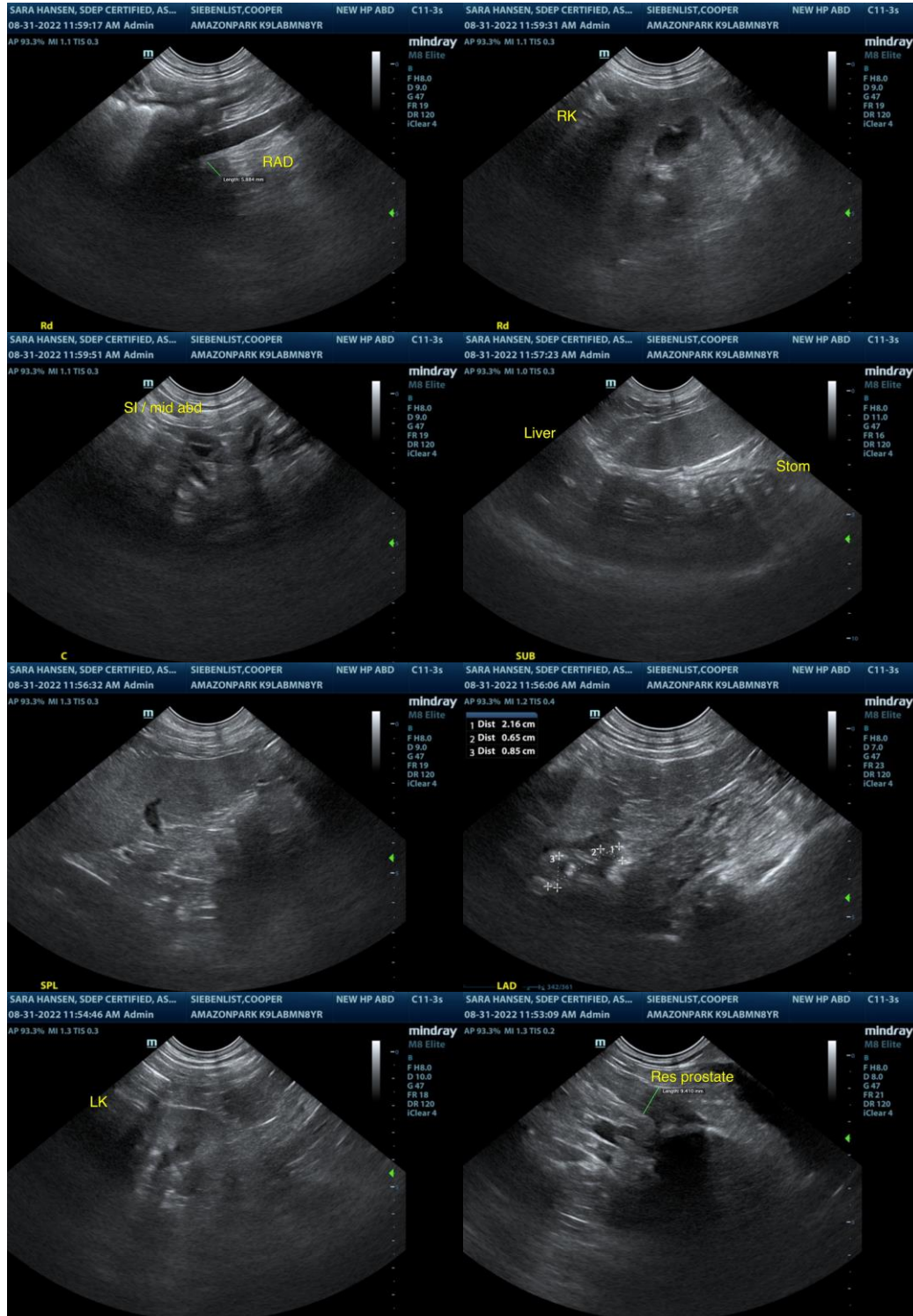
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SPECIES

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Labrador Retriever

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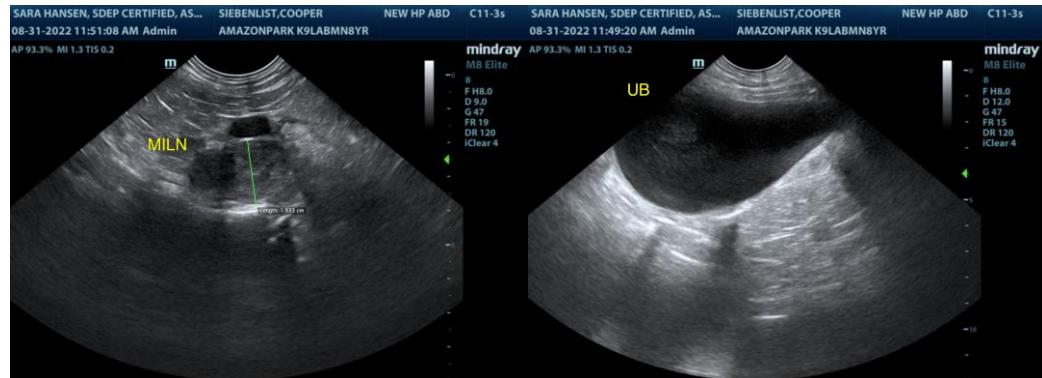
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
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