



**PATIENT**

Carlos Piroli

**PRESENTING CLINICAL SIGNS**

Study submitted for analysis and confirmation of an agasaca

**SPECIES**

Canine

**COMPUTED TOMOGRAPHIC STUDY OF THE THORAX & ABDOMEN**

Post contrast study of the thorax and plain and post contrast studies of the abdomen available for review.

**BREED**

Chihuahua Mix

**COMPUTED TOMOGRAPHIC FINDINGS**

**Abdomen**

Patient has a history of apocrine gland anal sac adenocarcinoma.

**SEX**

Male Neutered

An ill-defined heterogeneously enhancing mass with multifocal mineralizations of 4 x 3 x 2 cm is seen emerging from and expanding the left anal gland. The right anal gland presents within normal limits.

**AGE**

12 Years

Multiple severe sublumbar lymphadenomegaly with the lymph nodes measuring up to 10 x 5 cm involving the sacral, hypogastric, and medial iliac lymph nodes is seen with severe vascular deviation, compression, and infiltration including the aortic and caudal abdomen vena cava trifurcations. Extensive peripheral fat stranding and peripheral fluid accumulation are noted.

**INTERPRETED BY**

Nele Eley, DVM  
Dr. med. Vet. DipECVDI

No evidence of aggressive osteolytic changes and no evidence of vertebral canal extension is seen at this point.

The kidneys, adrenal glands, liver, pancreas, and gastrointestinal tract present within normal limits.

**HOSPITAL NAME**

Scottsdale Veterinary  
Clinic

Occasional hyperenhancing splenic nodules are seen.

A moderate amount of hyperattenuating material is present within gallbladder. The cystic duct is mildly dilated. No evidence of common bile duct obstruction is seen.

A subcutaneous soft tissue nodule is seen lateral to the right coxofemoral joint.

**REFERRING VET**

Dr. Gans

**Thorax**

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern are uniform and considered within normal limits.

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The cardiovascular structures including the pulmonary vasculature are within normal limits.

Multiple interstitial pulmonary nodules of up to 2 cm diameter are seen within the left and right lung.

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Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.



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**COMPUTED TOMOGRAPHIC DIAGNOSIS**

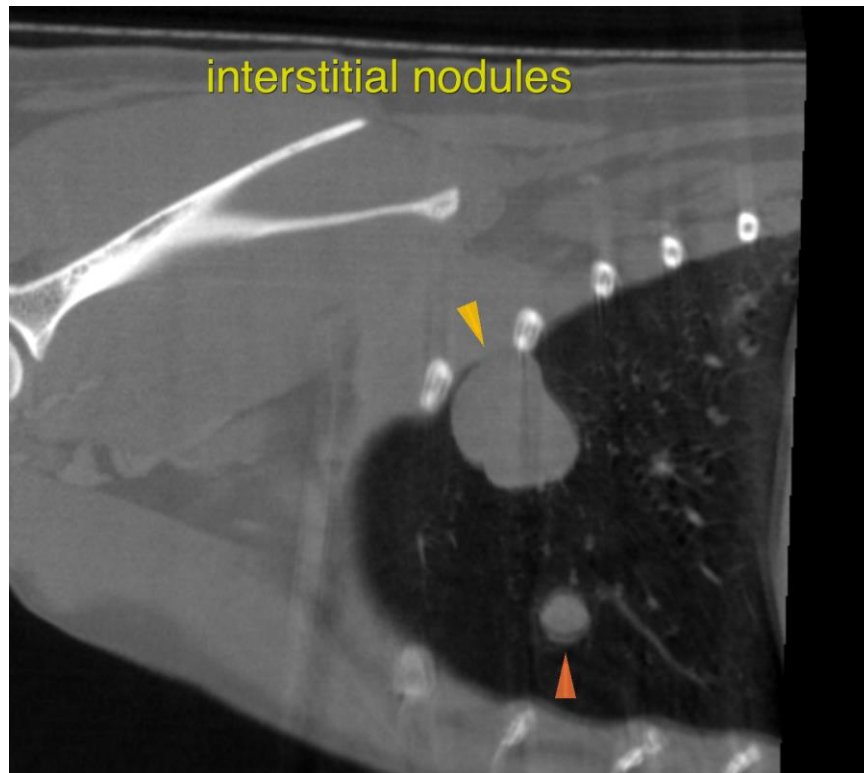
- History of apocrine gland adenocarcinoma of the left anal sac with multiple metastases to the sublumbar lymph nodes and pulmonary metastases.
- Biliary microlithiasis / biliary sludge.
- Subcutaneous soft tissue nodule.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

With the history of a confirmed anal gland adenocarcinoma, the CT findings have to be interpreted as diagnostic for metastases within the sublumbar lymph nodes with severe vascular compression, deviation, and infiltration, which may limit the resectability of the lymph node metastases should this be a consideration in this patient.

The peripheral fluid accumulation and fat stranding highly suggest presence of extensive regional carcinomatosis.

The interstitial pulmonary nodules should be regarded as metastases until proven otherwise.





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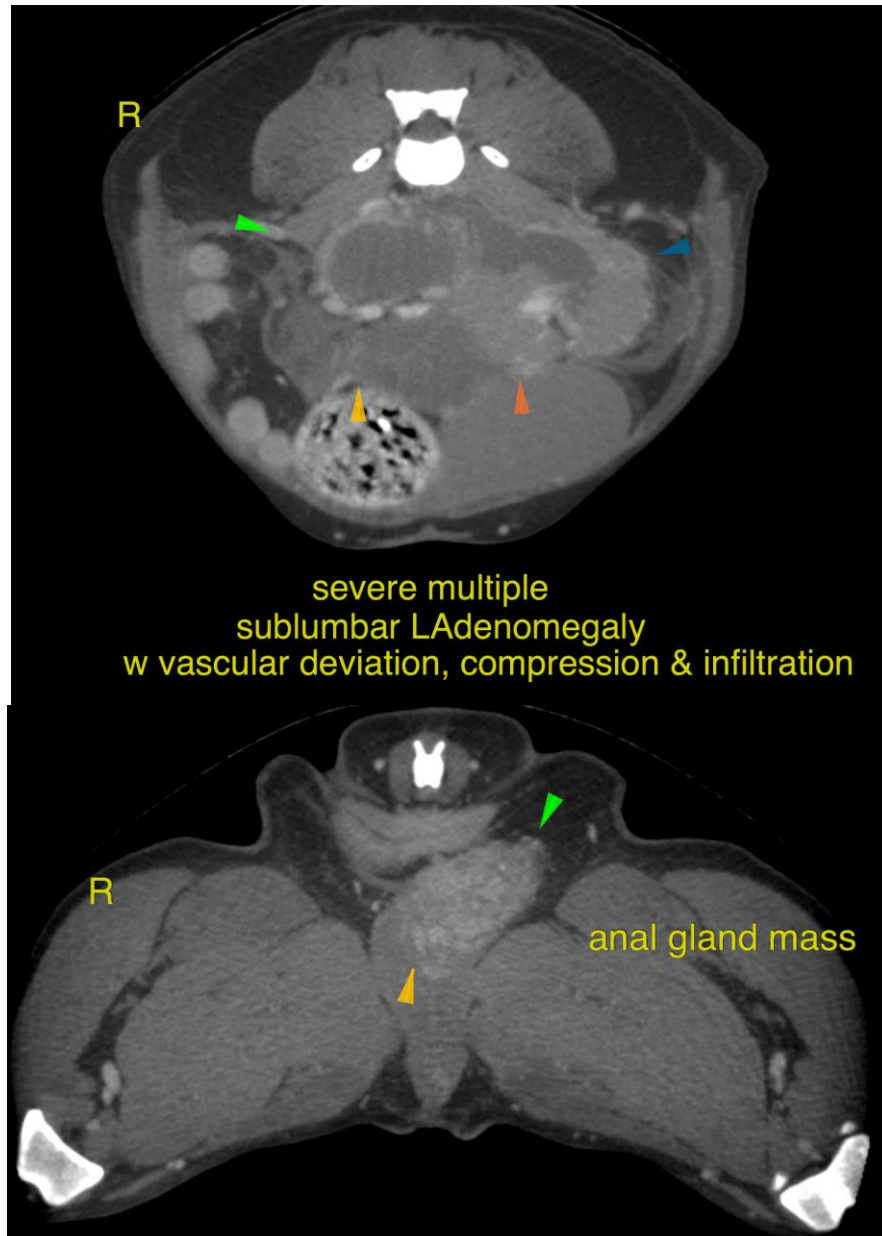
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

Canine

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.

**BREED**

Chihuahua Mix

**Nele Eley**, DVM, Dr. med. vet., DipECVDI  
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Senior lecturer University of Giessen, Germany, Veterinary Faculty, Department of Radiology  
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