



PATIENT

Oliver Czukar

PRESENTING CLINICAL SIGNS

On June 2 for swollen left anal gland. On examination left anal gland hard and unable to express previously in March has an anal gland abscess. Cytology showed Apocrine anal gland carcinoma with secondary septic neutrophilic inflammation. Myxomatous mitral valve degeneration (ACVIM stage B1), and Trace tricuspid regurgitation Mar 13/23. CT for surgical planning and staging.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Rectal examination: 2.5 x 3 cm left anal sac mass

BREED

Australian Shepard

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN & THORAX

Plain and post contrast studies in soft tissue, bone, and lung windows available for review.

COMPUTED TOMOGRAPHIC FINDINGS

SEX

MN

Abdomen

An irregular shaped, ill-defined, approximately 38mm sized mass is seen expanding the left anal sac. Nonuniform contrast enhancement with central cavitation is noted. The right anal sac presents within normal limits.

AGE

9 Years

The left sacral lymph node is moderately enlarged measuring 15mm in diameter with moderate nonuniform contrast enhancement.

The left medial iliac lymph node is minimally enlarged measuring 4mm in diameter.

INTERPRETED BY

Nele Eley, DVM
Dr. med. Vet. DipECVDI

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

HOSPITAL NAME

Animal Health
Partners

The adrenal glands are within normal limits for size, shape and organ architecture.

Both liver and spleen present with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

REFERRING VET

Jerome Gagnon

A 3.5mm sized calculus is seen ventrally within the gallbladder.

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

INVOICE

59138

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

Thorax

DATE

7-3-23

The bony and surrounding soft tissue structures are within normal limits.

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



PATIENT uniform and considered within normal limits.

Oliver Czucar The left atrium appears to be mildly enlarged with a LA/AO ratio of slightly more than 1.5. Mild congestion of the inflowing pulmonary veins is seen with no evidence of cardiogenic pulmonary edema.

SPECIES
Canine The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits.

BREED
Australian Shepard The lung parenchyma presents the expected architecture and attenuation behavior. No evidence of interstitial pulmonary nodules or masses is seen.
Small incidental gas pockets are seen within the esophageal lumen, there is no evidence of abnormal dilation.

SEX **COMPUTED TOMOGRAPHIC DIAGNOSIS**

- MN
- Expansile soft tissue mass of the left anal sac compatible with the history of anal sac carcinoma.
 - Moderate left sacral lymphadenomegaly compatible with metastatic disease.
 - Minimal left medial iliac lymphadenomegaly equivocal for reactive hyperplasia versus early metastatic disease.
 - Single small non-obstructive gallbladder calculus.
 - Mild left atrial enlargement with no evidence of cardiogenic pulmonary edema.
 - No evidence of pulmonary metastases.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings are compatible with the history of anal gland adenocarcinoma within the left anal sac. The mass appears to be resectable.

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Note the presence of moderate left sacral lymphadenomegaly being highly suggestive for metastatic disease. The left medial iliac lymph node is minimally enlarged. The minimal enlargement may represent uncomplicated reactive hyperplasia or early metastatic disease.

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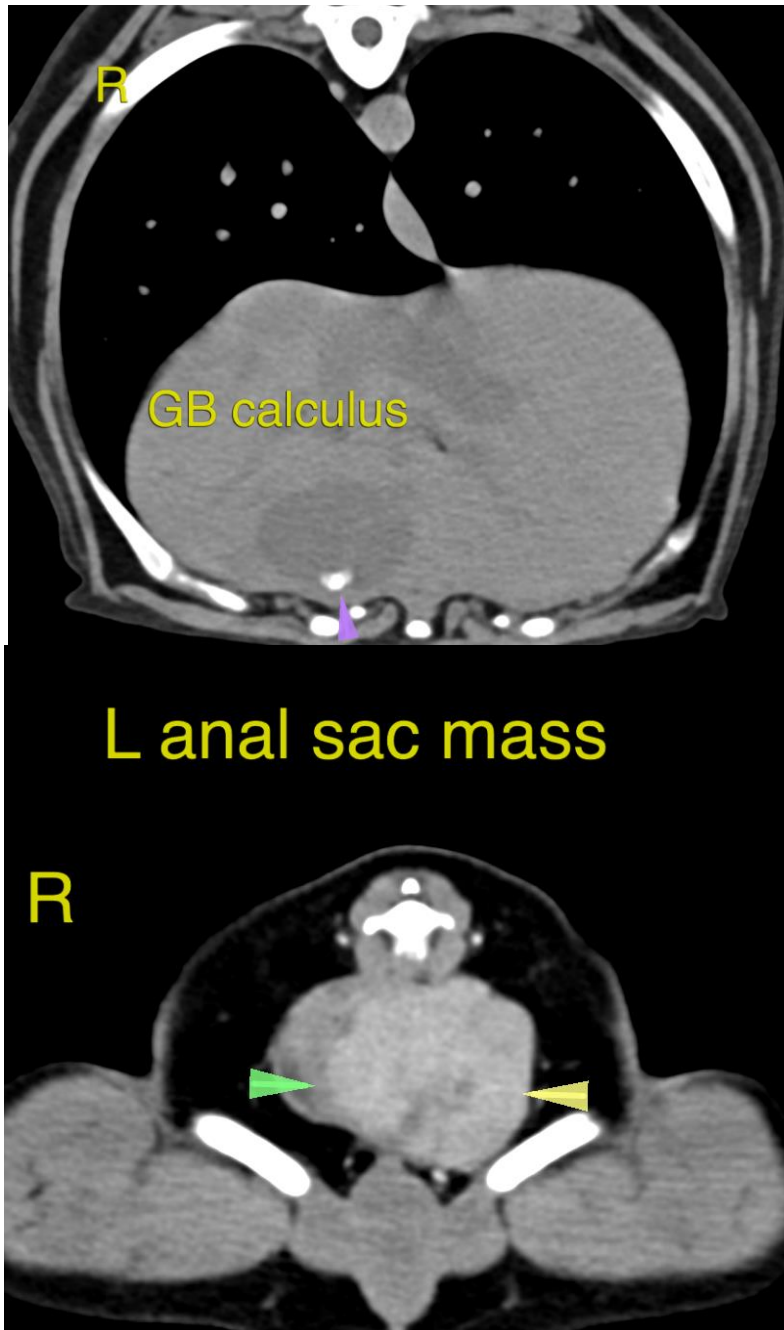
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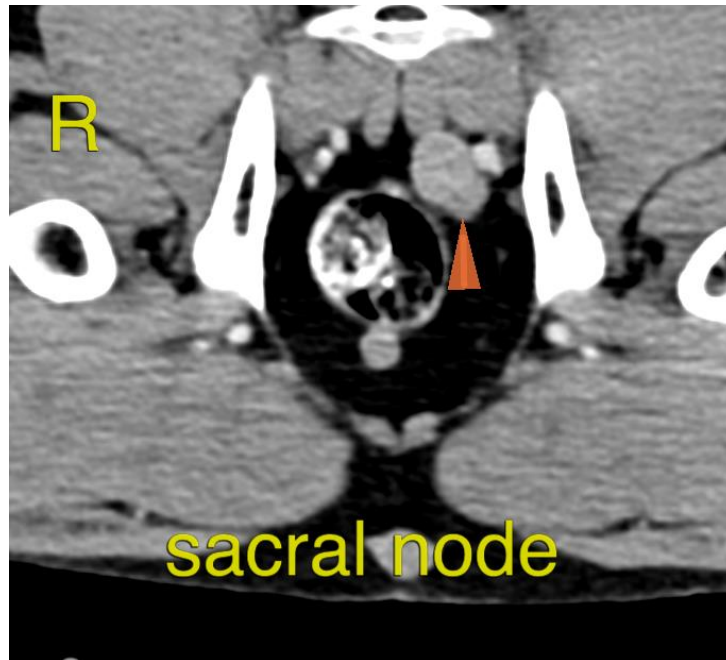
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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