

PATIENT

Midnight Williams

SPECIES

Canine

BREED

Poodle

SEX

Neutered Male

AGE

8 Years 1 Month

WEIGHT

92 Pounds

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet Specialist
in Diagnostic Imaging

IMAGING PERFORMED BY

Pete Bashara, DVM

HOSPITAL NAME

Gentle Doctor AH

REFERRING VET

Pete Bashara, DVM

INVOICE

35105

DATE

12/26/25

PRESENTING CLINICAL SIGNS

History: Neoplasia, Perineal / Growth/Lump noted 12/10/2025 - further defined; rectal/right anal gland region mass effect very large sublumbar lymph node mass effect on radiographs Imaging today to understand extent of disease and surgical planning.

Abnormal PE/Chem/CBC/UA Results: Exam without rectal today unremarkable Labs submitted were greater than 90 days in the past.

COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

At the level of the right anal gland, a soft tissue dense mass of approximately 4.1 x 3.5 cm is noted, confluent medially with the rectum and caudally with the perineal tissues, showing well-perfused tissue with hyperplasia of the supplying vessels. The mass leads to a deviation of the sphincter and the caudal rectum. Corresponding to that, large cystic masses are noted cranially to that and at the level of the aortic trifurcation exceeding diameters of over 10 cm and leading to a deviation and impression of the descendant colon and the urinary bladder.

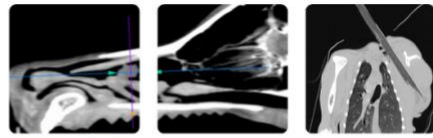
The abdominal organs are inconspicuous apart from that. Free peritoneal fluid is not noted. The adjacent bony structures of the pelvis and the lumbar spine are inconspicuous as well as the paraspinal soft tissues.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Suspected neoplastic lesion right anal gland
- Suspected regional metastasis tributary lymph nodes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The CT findings likely represent malignant neoplasia of the right anal gland. Differentials would include but are not limited to anal adenocarcinoma. The severe enlargement of the tributary lymph nodes is highly suspicious for regional metastases. Additional hypercalcemia (?) and diameters of the tributary lymph nodes over 4.5 cm are consistent with a bad prognosis. For further differentiation, FNA and biopsy are needed of the anal gland and the affected lymph nodes. Further staging in case of surgery is recommended (chest radiographs or CT). As far as can be assessed with CT, the mass is ill-defined in its medial and caudal parts, which is likely representing an aggressive/invasive growth. This might complicate a surgical attempt.



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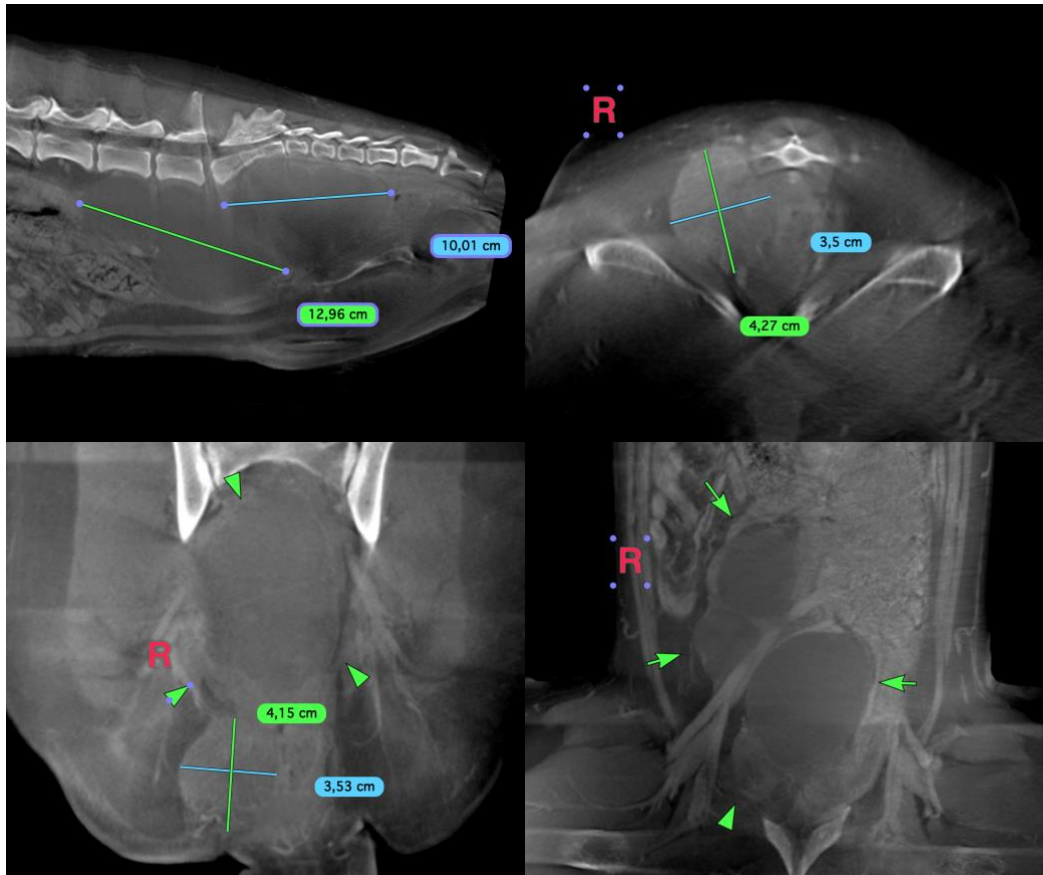
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
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