



## PATIENT

Mocha Roberts

## SPECIES

Canine

## BREED

Poodle Mix

## SEX

Male Neutered

## AGE

11

## WEIGHT

28.0

## INTERPRETED BY

Sebastian Schaub, DVM  
Dr. med. vet.  
DipECVDI

## IMAGING PERFORMED BY

Matthew O'Neil

## HOSPITAL NAME

Westford Veterinary  
Emergency and  
Referral Center

## REFERRING VET

Mallory Watson

## INVOICE

73057

## DATE

12-18-25

## PRESENTING CLINICAL SIGNS

Left anal saccullectomy performed June 2025, just finished chemotherapy 6 weeks ago. Restaging today.

Abnormal PE/Chem/CBC/UA Results: none

## COMPUTED TOMOGRAPHY OF THE THORAX, ABDOMEN AND PELVIS

A high resolution pre- and post-contrast CT study of the thorax, abdomen and pelvis is provided for review.

## COMPUTED TOMOGRAPHIC FINDINGS

### Thorax

Along the caudal thoracic spine, multifocal spondylosis formation is seen.

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 is uniform and considered within normal limits.

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

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.

The lung parenchyma presents the expected architecture and attenuation behavior.

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

### Abdomen & Pelvis

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.

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.

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

A sacral lymph node is significantly enlarged, rounded, uniform soft tissue attenuating and has a heterogeneous contrast enhancement pattern. The enlarged sacral lymph node is measuring 2.4 x 1.8 x 3.0 cm. Multiple mild prominent sacral lymph nodes are appreciated. The left medial iliac lymph node is prominent.

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

The left anal sac is absent.

The vertebral endplates L6/L7 present moderate spondylosis formation.



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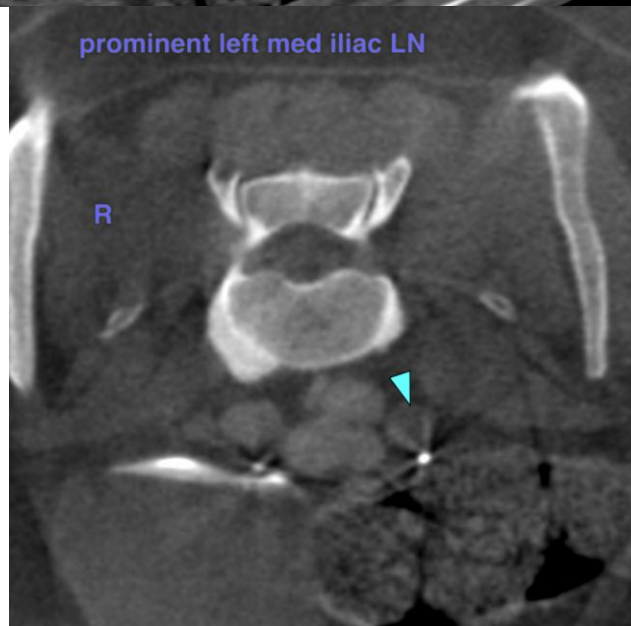
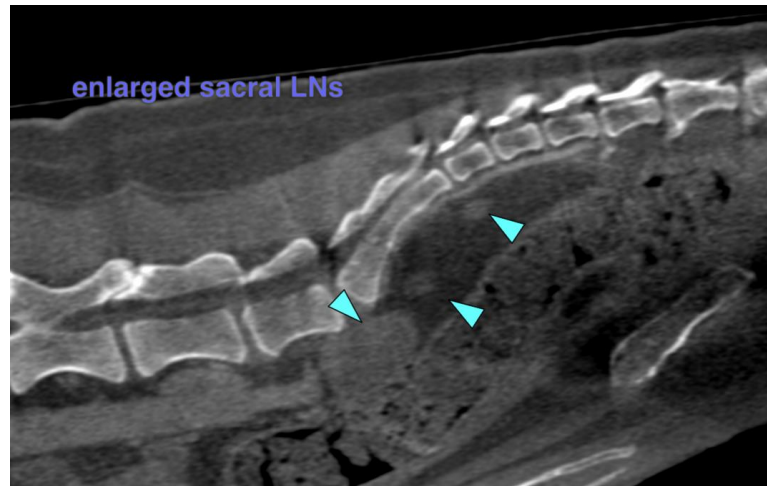
The osseous and surrounding soft tissue structures of the pelvis are within normal limits. Both coxofemoral joints present smooth osseous margins and congruent joint spaces.

## COMPUTED TOMOGRAPHIC DIAGNOSIS

- History of surgical excision of the left anal sac
- Lymphadenopathy of a sacral lymph nodes and the left medial iliac lymph node
- Spondylosis deformans
- Normal thorax, no evidence of pulmonary metastatic disease

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The lymphadenopathy of multiple lymph nodes of the hypogastric lymph center in combination with the history of excised left anal sac adenocarcinoma is consistent with metastatic spread.





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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 Schaub**, Sebastian Schaub, DVM, Dr. med. vet. DipECVDI  
[info@sonopath.com](mailto:info@sonopath.com)