



PATIENT PRESENTING CLINICAL SIGNS

Cooper Wells Recurrent right anal sac carcinoma which was previously removed September 2021. CT scan for staging and possible surgical planning.
 Abnormal PE/Chem/CBC/UA Results: Rectal examination: ~3.5 cm right anal sac mass extending to the left side.

SPECIES

Canine

COMPUTED TOMOGRAPHY OF THE THORAX AND ABDOMEN

A pre- and post-contrast CT study of the thorax and abdomen in a bone, lung and soft tissue reconstruction are provided for review.

BREED

Havanese

COMPUTED TOMOGRAPHIC FINDINGS

Thorax

SEX

The vertebral body of C7 and T2 present with an ill-defined geographic osteolytic lesions⁴, presenting a hypoattenuating center (- 280HE).

MN

Server dorsoventral flattening of the caudal cervical tracheal segment is seen, with approximately 5-10% volume left

AGE

9 Years

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.

INTERPRETED BY

Sebastian Schaub, DVM
 Dr. med. vet. DipECVDI

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.

HOSPITAL NAME

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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

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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.

INVOICE

53245

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.

DATE

8-3-22

The left hepatic lymph node is prominent and has a hypoattenuating (18HU) non-contrast enhancing parenchyma.

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

The position, delineation, wall and content of the gastrointestinal tract are considered within



PATIENT normal limits throughout.

Cooper Wells In the region of the right anal sac, a multilobulated, soft tissue attenuating and homogeneous moderate contrast enhancing mass is seen, partially encompassing the rectum – extending to the left side; the mass is measuring approximately 4.0 x 3.5 x 5.4 cm in size.

SPECIES The sacral lymph nodes are prominent, and the most cranial sacral lymph node is moderately enlarged, rounded and presents with a heterogeneous contrast enhancement pattern.. The right medial iliac lymph node is mildly prominent.

Canine

COMPUTED TOMOGRAPHIC DIAGNOSIS

- BREED**
- Havanese
- History of recurrent right sided anal sac adenocarcinoma with potential local invasive growth
 - Lymphadenopathy sacral lymph nodes and right medial iliac lymph node
 - Suspect cystic enlargement left hepatic lymph node
 - Marked tracheal collapse
 - Suspect fatty bone marrow replacement vertebral body C7&T2 – the odds for metastatic disease are considered low
 - No evidence of pulmonary metastatic disease
- SEX**
- MN

AGE **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

9 Years The findings are fitting the history of recurrent right sided anal sac adenocarcinoma with potential local invasive growth. Secondary metastatic spread to the sacral lymph nodes and likely the right medial iliac lymph node.

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The cyst like lesions of the left hepatic lymph node is most consistent with lymphangiectasia, lymphatic cysts, cystic lymphatic ectasia or sinus dilation.

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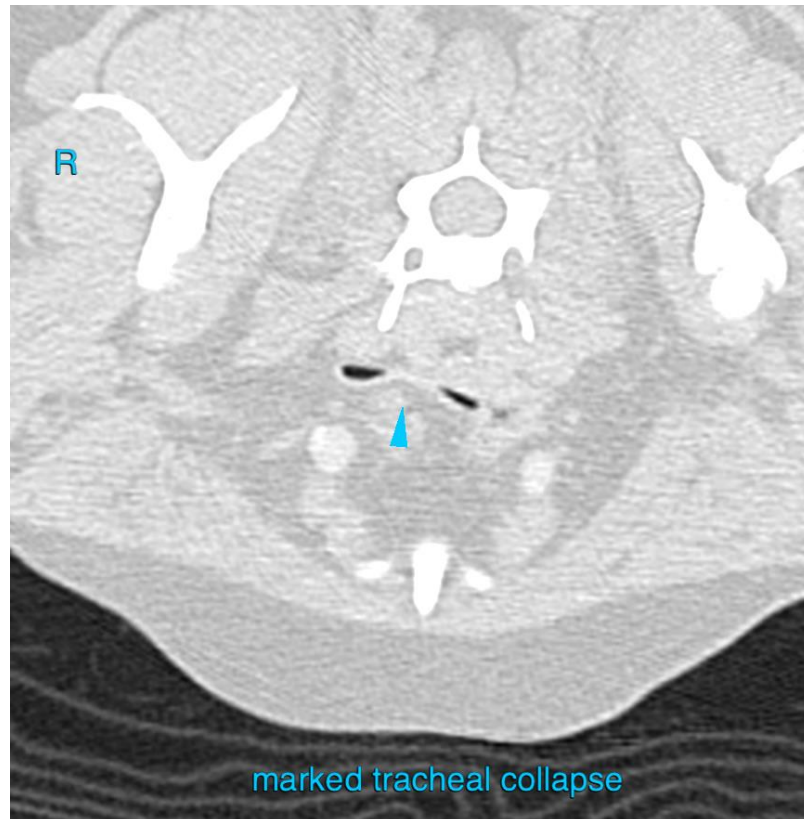
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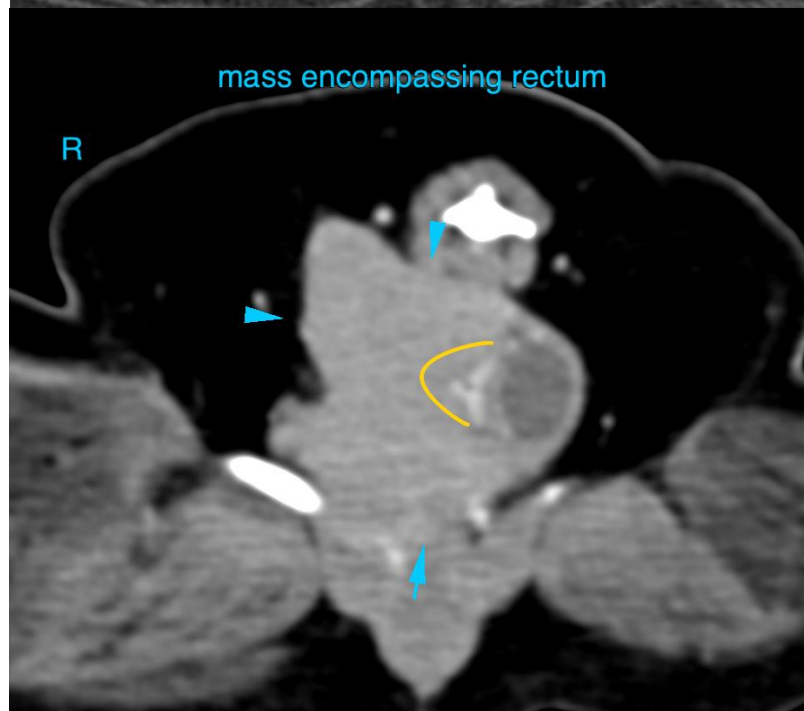
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marked tracheal collapse



mass encompassing rectum



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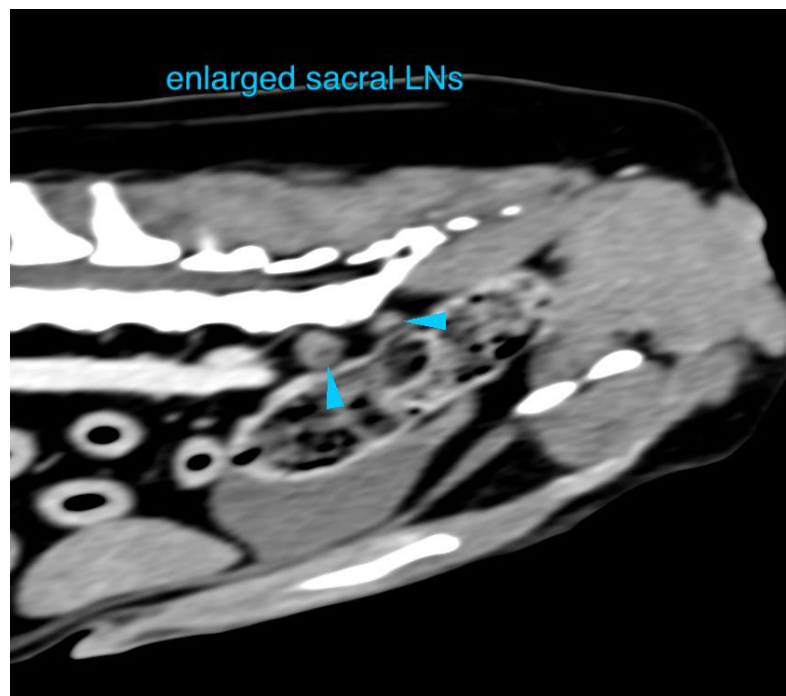
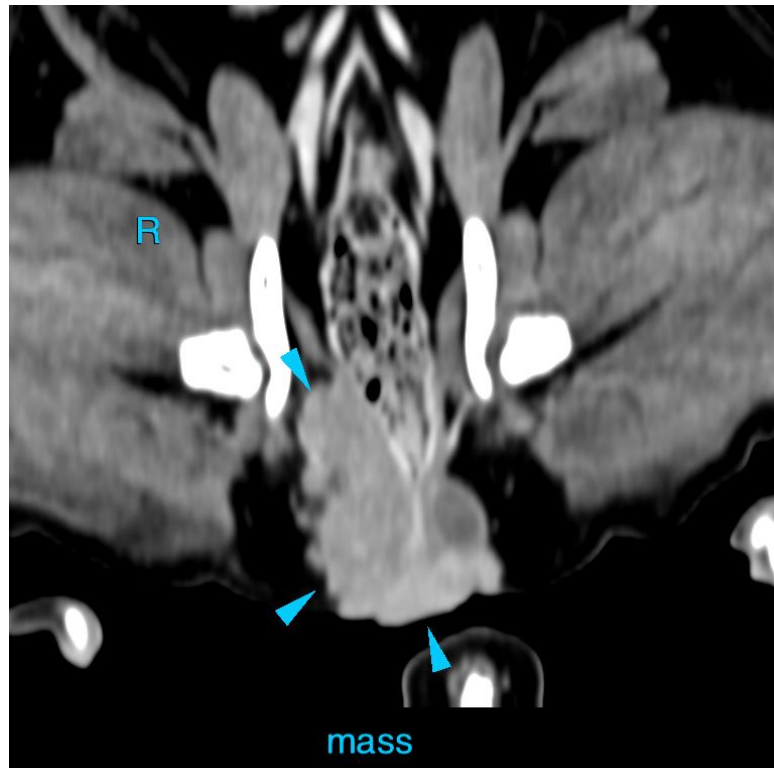
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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