



PATIENT

Siren Defocault

SPECIES

Canine

BREED

German Shepherd

SEX

FS

AGE

5 y

WEIGHT

69 lb

INTERPRETED BY

Keith Blass, DVM, MS,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Brandi Kurzowski

HOSPITAL NAME

Corfu VC

REFERRING VET

Dr. Gardner

INVOICE

DATE

1/27/26

PRESENTING CLINICAL SIGNS

Grade 1/6 left-sided murmur.

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

Left atrial size is normal. The mitral valve appears normal. Left ventricular dimensions are normal. Left ventricular systolic function is normal. The aorta and aortic valve appear normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve appears normal. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

LA - 39.3 mm

LVIDd - 42.6 mm

LVIDs - 24.4 mm

FS - 42.7%

RA - 31.8 mm

RVOT - 1.20 m/s

ECHOCARDIOGRAPHIC FINDINGS

A single lead ECG is submitted for review.

HR: 108 bpm

Rhythm: Sinus

Normal sinus rhythm is present throughout this recording. All complex amplitudes and intervals are within normal limits. No premature beats or conduction blocks are seen.

ASSESSMENT/RECOMMENDATIONS

Normal echocardiogram and ECG

These examinations demonstrate no abnormalities. While a definitive reason for Siren's murmur was not appreciated in her echocardiogram, it's likely that her murmur is functional/innocent in nature, as no flow abnormalities that could result in the development of a pathologic murmur were appreciated in the image set.

No therapy is recommended based on these exams.

A recheck echocardiogram is recommended if the characteristics of Siren's murmur change, or if other new physical exam and/or clinical abnormalities suggestive of cardiac dysfunction develop.



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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.

Keith Blass, DVM, MS, DACVIM (Cardiology)

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