



PATIENT

Roxie Lake

SPECIES

Canine

BREED

Pitbull

SEX

Female Spayed

AGE

8 years

WEIGHT

57lbs

PRESENTING CLINICAL SIGNS

History: Chronic hematuria. Elevated cardiopet ProBNP (1026). No murmur. Having an echocardiogram and a urinary system examination. *Sedated with butorphanol and ultimately with Dexdomitor for study (for left-sided images only).

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and Doppler imaging is available.

Left ventricle: The LV diameter is normal with adequate myocardial function. LV wall thicknesses are normal.

Left atrium: The left atrium is normal.

Mitral valve: The mitral valve is mildly thickened with no prolapse into the left atrial lumen. Trace central MR. Normal velocity.

Aortic valve/Aorta: The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity. No aortic insufficiency.

Right ventricle: Normal right ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension.

Right atrium: Normal RA dimension.

Tricuspid valve: The tricuspid valve appears normal with no tricuspid regurgitation.

Pulmonic valve/Pulmonary artery: The pulmonic valve is normal in morphology and mobility. No pulmonic insufficiency. Normal RVOT velocity; laminar flow.

Pericardium/other: No pericardial or pleural effusion noted. No obvious cardiac masses.

Heart rhythm: ECG reveals a sinus rhythm with an average HR of 100bpm.

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

2-Dimensional Measurements

Ao diam (cm)	2.3
LA diam (cm)	2.3
LA:Ao (Swe)	1.0
IVS thickness (cm)	1.0
LVID diastole (cm)	3.8
PW thickness (cm)	1.2
LVID systole (cm)	2.5
FS (%)	34

Doppler Measurements

PV Vmax (m/s)	0.7
AoV Vmax (m/s)	1.4
MR Vmax (m/s)	5.8
TR Vmax (m/s)	NA
TR PG (mmHg)	NA

IMAGING

PERFORMED BY

Pamela Harrigan,
RDCS

INTERPRETATION OF THE FINDINGS

Overtly normal cardiac structure and function. The overall dimensions are normal with no evidence of significant structural disease. A small mitral leak is noted which may suggest early valve disease or may be physiologic in origin. Follow up is advised should a murmur be ausculted in the future. No additional issues are identified.

HOSPITAL NAME

Foster Veterinary
Clinic

REFERRING VET

Dr. Hattan

INVOICE

26806

DATE

10/10/22



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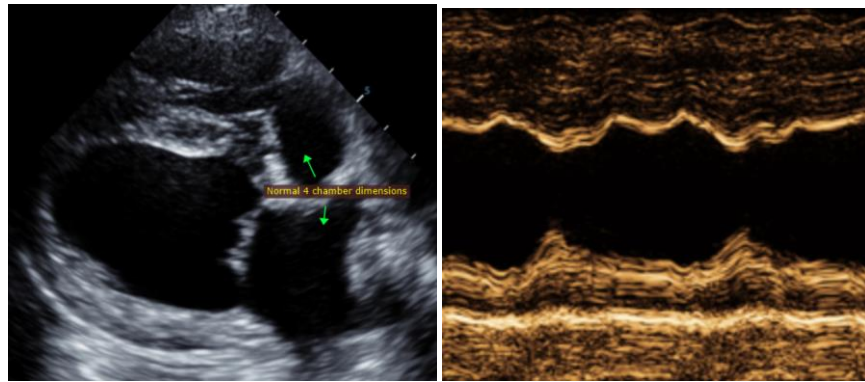
RECOMMENDATIONS

- No cardiac medications are clearly indicated.
- No cardiac contraindication for general anesthesia.
- Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

PLAN

- Recommend conservative monitoring with a recheck echocardiogram in 12 months to screen for any progressive changes.

IMAGES



INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

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

Thank you for this referral. This report was generated using transcription software, and minor dictation errors may be present. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance, please contact me.

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

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info@sonopath.com

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