



PATIENT

Ace Speas

SPECIES

Canine

BREED

Pitbull

SEX

Male Neutered

AGE

10 years

WEIGHT

74.4lbs

PRESENTING CLINICAL SIGNS

History: Heartworm positive dog currently undergoing treatment. Suspect cardiomegaly on CXR with reversed-D appearance. Cough. Also, currently being treated for suspected bronchopneumonia. Undergoing HW treatment with SPCA (adopted in Sept 2025). Started on Doxycycline 8/29 which he was on for 30 days. Has been given 2 adulticide injection, on 10/29 and 10/30. He is also on Prednisone. No murmurs or arrhythmias have been appreciated.

-Current medications: Baytril 136mg, Clavamox 250mg, Prednisone 20mg, Cerenia 160mg - 1/2 tablet SID PRN Preventatives: Triheart Plus, Vectra. Sedated with Torb.

-Abnormal PE/Chem/CBC/UA Results: Grade 1/6 HM, but difficult to really appreciate. Normal RR/RE. Muroid nasal discharge BCS 6/9, MCS 3/3. Very relaxed, calm demeanor. Doppler BP: 191, 200, 202mmHg. Malvern BW - Chem: BUN 32 H, Cr 1.0, normal LES, remainder NSF - CBC: Hct 39.3%, Plts 325-n, Mono 1.26 H, Eos 0.04 L

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. Mild thickening of mitral valve leaflets with no prolapse into the left atrial lumen. Mild eccentric mitral regurgitation with no left atrial dilation. Normal MR velocity. Normal LV diameter with adequate myocardial function. The tricuspid valve appears normal with mild tricuspid regurgitation. Normal velocity. No significant right heart enlargement. The MPA and branches are prominent. No obvious worms are visualized in the right heart or distal branches. The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic and aortic outflow velocities with laminar flow. No obvious aortic and trace pulmonic insufficiency. No pericardial or pleural effusion noted. No obvious cardiac masses.

CARDIAC CHART

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Renee Trionfetti, VMD

HOSPITAL NAME

East
Bradford Veterinary
Hospital

REFERRING VET

Dr. McGrath

INVOICE

45884

DATE

11/21/25

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT	5.2	2.7	1.2	1.2	34	64	0.3
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LA 2D short axis Base view (cm)	LVIDd Avg; 2D and m-mode short axis (cm)	LVIDs Avg; 2D and m-mode short axis (cm)
NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6	BELOW	BELOW	BELOW	BELOW
PATIENT	80	2.3	1.2	33.8	2.5	4.9	3.2
*Normal chamber parameters expressed as a mean value (SD)				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
BODY WEIGHT DEPENDENT PARAMETERS				5	1.40 (4.5)	2.74 (5.2)	1.60 (4.7)
*Note: All measurements based upon multi-modal images and methods. An average value is reported.				10	1.50 (3.8)	3.27 (3.5)	2.06 (3.1)
				15	1.83 (2.0)	3.71 (2.4)	2.43 (2.1)
				20	2.02 (1.9)	4.14 (2.2)	2.80 (2.0)
				25	2.18 (2.4)	4.48 (2.9)	3.10 (2.5)
				30	2.33 (3.3)	4.83 (3.9)	3.39 (3.4)
				35	2.48 (4.3)	5.17 (5.0)	3.69 (4.5)
				40	2.62 (5.2)	5.48 (6.1)	3.96 (5.4)
				50	2.88 (7.1)	6.07 (8.3)	4.46 (7.4)

Adapted from June Boon, Veterinary Echocardiography, 1998
Rishniw M and Hollis NE, J Vet Intern Med 2000; 14:429-435
Hansson et al, Vet Rad and Ultrasound 2002
Bonagura et al. Echocardiography: principles of interpretation, Vet Clin North Am 15:1177, 1995



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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Chronic degenerative valve disease causing mild mitral and tricuspid regurgitation. Lack of significant left atrial enlargement indicates the current risk for complication is low. The MPA and branches are prominent; however, no obvious adult heartworms seen. It is important to note that ultrasound is not 100% sensitive for finding adult worms however, although suspicion is low in a dog without associated clinical signs such as syncope or significant RH enlargement.

Treatment for heartworm disease should be dictated by the American Heartworm Society website (www.heartwormsociety.org), typically including three adulticide injections in total.

A cough in this patient is likely multifactorial in origin. Depending on the severity of symptom, consider a course of anti-inflammatory Prednisone, Hydrocodone as needed, a course of Baytril, etc.

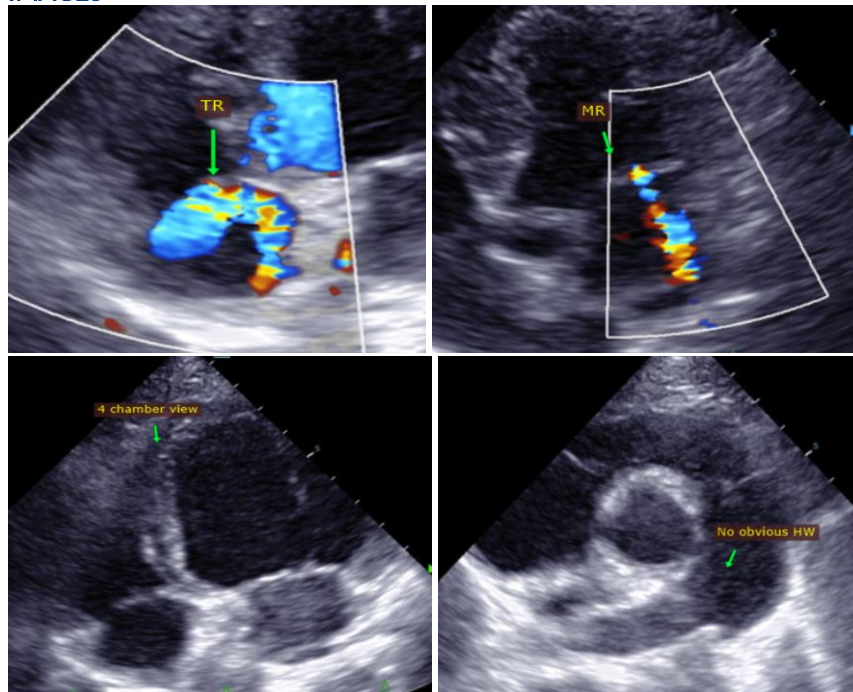
If treatment is successful, good chance for no long-term issues associated with HW disease (cough, pulmonary hypertension, pulmonary damage, etc.) given a normal cardiac structure and lack of significant PAH.

PLAN

Address cough as discussed. No cardiac medications are indicated. Follow up for heartworm treatment should be dictated by the American Heartworm Society website.

A recheck echocardiogram is recommended in 6 months, sooner if any additional clinical signs arise.

IMAGES





PATIENT

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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.

SPECIES

Canine

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.

BREED

Pitbull

Maggie Machen Lamy, DVM
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info@sonopath.com

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