



**PATIENT**

Torro Warwaruk

**SPECIES**

Canine

**BREED**

American Bull Terrier

**SEX**

Male Neutered

**AGE**

11 years

**WEIGHT**

77.8lbs

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

**IMAGING PERFORMED BY**

A. Westcott, DVM

**HOSPITAL NAME**

Alastair Westcott,  
DVM

**REFERRING VET**

Dr. Westcott

**INVOICE**

27997

**DATE**

12/14/22

**PRESENTING CLINICAL SIGNS**

History: Presented for lameness. Diagnosed with aggressive bone tumor. CXR: NSF. Staging exam.  
-Abnormal bloodwork: Mild non regenerative anemia with a mild elevation in ALKP.

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. Normal mitral valve leaflets with no prolapse into the left atrial lumen. Trace mitral regurgitation with a normal left atrial dimension. Normal LV diameter with adequate myocardial function. The tricuspid valve appears normal with trace tricuspid regurgitation. Normal right atrial and ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension. No cardiac lesions seen associated with the right heart or heart base; however, hyperechoic tissue is seen surrounding the aorta (suspect fat). The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic and aortic outflow velocities with laminar flow. No obvious aortic or pulmonic insufficiency. No pericardial or pleural effusion noted. No obvious cardiac masses.

**CARDIAC CHART**

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
<b>NORMAL PARAMETER</b>	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
<b>PATIENT</b>	NM	NM	NM	1.3	37	67	NM
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)
<b>NORMAL PARAMETER</b>	50-100	0.7-1.7	0.7-1.6	BELOW	BELOW	BELOW	BELOW
<b>PATIENT</b>	NM	2.0	1.0	35.3	3.0	4.1	2.4
*Normal chamber parameters expressed as a mean value (SD)				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
<b>BODY WEIGHT DEPENDENT PARAMETERS</b>				5	1.40 (4.5)	2.74 (5.2)	1.60 (4.7)
<i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i>				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)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Overtly normal cardiac dimensions and function, with no obvious dysfunction or dilation of the left heart. Trace MR and TR may suggest early valve disease; however, a physiologic origin is suspected. Follow up is advised should a murmur be ausculted in the future. No other significant valvular leaks are visualized, and no evidence of pulmonary hypertension. No obvious intra or extra-cardiac lesions are appreciated. That being said, it is important to note that 2D ultrasound is largely insensitive, particularly for extra-cardiac lesions in the absence of effusion. Advanced screening through a thoracic CT scan would be the gold standard tool.



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Monitor for development of a heart murmur, cough, labored breathing, exercise intolerance or collapse episodes.

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A recheck echocardiogram is recommended should a significant murmur develop, or signs of cardiac compromise be noted in the future.

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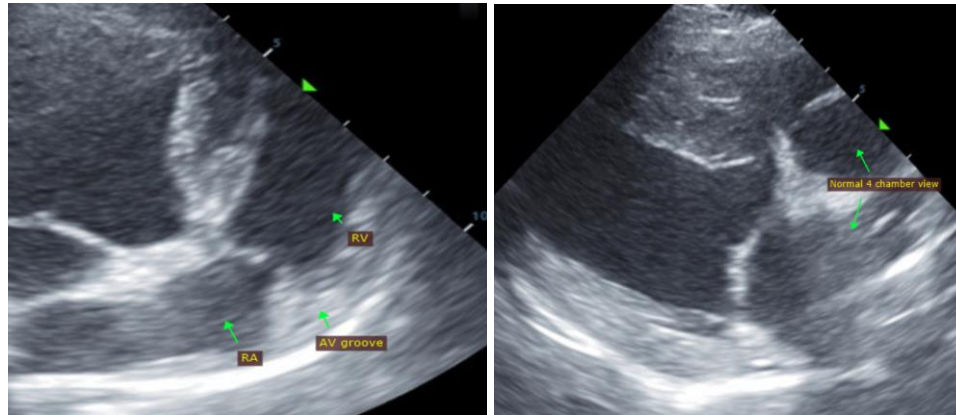
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**IMAGES**



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.

**INTERPRETED BY**

Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

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**

A. Westcott, DVM

**Maggie Machen Lamy, DVM**  
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