



PATIENT

Lacey Kulick

SPECIES

Canine

BREED

Bichon Mix

SEX

Female Spayed

AGE

10.2 years

WEIGHT

15.5lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

G. Straino-Kaplan,
DVM

HOSPITAL NAME

Ramsey Veterinary
Hospital

REFERRING VET

Dr. Straino-Kaplan

INVOICE

32231

DATE

8/8/23

PRESENTING CLINICAL SIGNS

History: Pet was evaluated by Dr. Bonczynski on 11/30/22 at which time a CT scan was performed which found a right lateral thoracic subcutaneous soft tissue mass that extended into the thoracic cavity. Lacey underwent removal of the mass (with rib resection) on 12/5/22. The biopsy of the mass diagnosed Lacey with a high-grade (grade 3) soft tissue sarcoma. Lacey recovered well following surgery without any issues. After discussing Lacey's treatment options with Dr. Sherger on 1/9/23, the decision was made to start Lacey on Doxorubicin chemotherapy. 3rd and final doxorubicin treatment administered 3/20/2023. Atrial enlargement on recheck radiographs for chemo. BP: 130mmHg.

RADIOGRAPHIC FINDINGS *NOTE: Images submitted for supplemental cardiac information only. Normal cardiac silhouette. VHS: 9.5. No obvious evidence of CHF.

ECHOCARDIOGRAM FINDINGS

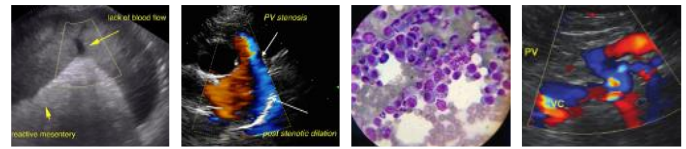
2D, m-mode, color flow and doppler imaging is available. Normal mitral valve leaflets with no prolapse into the left atrial lumen. Normal left atrial dimension. Normal LV diameter with adequate myocardial function. The tricuspid valve is not well visualized. Normal right atrial and ventricular diameter and morphology. The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic and aortic outflow velocities with laminar flow. 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)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT	NA	NA	1.0	1.1	59	92	0.16
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	NM	1.3	0.8	7.0	1.6	2.5	1.2
*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)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overtly normal cardiac dimensions and function, with no obvious dysfunction or dilation of the left heart. This is not considered an extensive study however, as color flow doppler is not



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assessed. Valvular regurgitation, pulmonary hypertension, etc. is not ruled out. That being said, in the absence of a heart murmur significant valve leaks are considered unlikely. No evidence of doxorubicin toxicity at this time.

SPECIES

Canine

Given these findings, the radiographic appearance is likely a normal variant. These films should be used as a baseline for future comparison.

BREED

Bichon Mix

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

SEX

Female Spayed

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

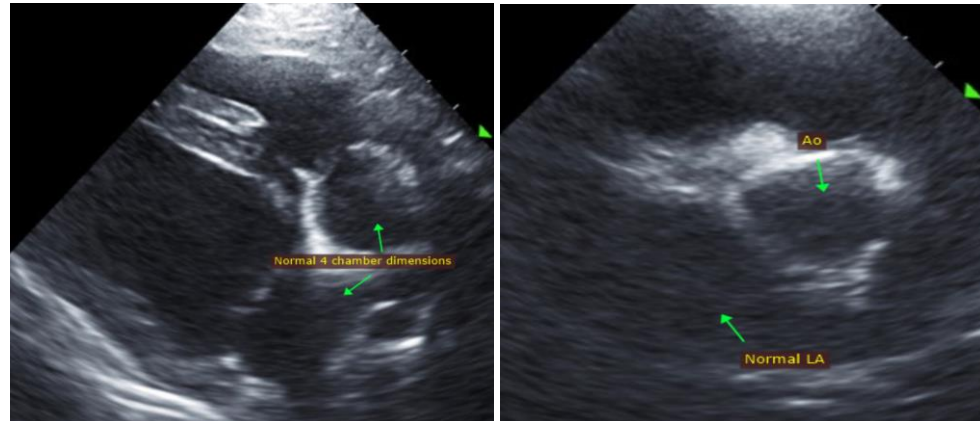
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

IMAGING PERFORMED BY

G. Straino-Kaplan,
DVM

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.

HOSPITAL NAME

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Hospital

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