



PATIENT

Maki McGee

SPECIES

Canine

BREED

Akita

SEX

Spayed Female

AGE

6 Years

WEIGHT

73 pounds

INTERPRETED BY

Camden Rouben,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Arielle Roldan CVT

HOSPITAL NAME

Milford Animal
Hospital

REFERRING VET

Dr. Sean Grasso DVM

INVOICE

13054

DATE

01/09/2026

PRESENTING CLINICAL SIGNS

Patient presented on 12/23 for hematuria and while running diagnostics probnp was found to be elevated / abnormal. No heart murmur ausculted, no known history of heart conditions or symptoms. Patient has since lost 4 lbs.

Abnormal PE/Chem/CBC/UA Results: PROBNP 3713.3 pmol/L - Abnormal Anaplasma positive Urine SG: 1.015

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (M-Mode)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	Up to 1.6	28-40	40-100	<0.6
PATIENT	--	--	NM	1.04	44.2	74	NM
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LAD LA MAX 4 Chamber	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				
PATIENT	--	--	0.5	33.1	2.84	2.76	1.54

Cardiac Presentation

Based off the images provided, the mitral valve leaflets are mildly thickened with trace mitral regurgitation in a central direction. There is **no** prolapse of the mitral valve leaflet. The left atrial size is normal. Left ventricular internal dimensions during diastole and systole are normal. There is normal right atrial size without tricuspid regurgitation. There is no evidence of pulmonary hypertension. The right ventricle subjectively appears normal in structure and function. The aortic valve appears normal. The aorta appears normal. There is no evidence of pleural effusion, pericardial effusion, or intracardiac masses.

ULTRASONOGRAPHIC FINDINGS

- Based off the images provided, the patient does have evidence of degenerative valve disease ACVIM stage B1 effecting the mitral valve.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No cardiac medications are indicated at this time. This is an unlikely cause for the severe elevation in the patient's NT proBNP. Since this can be a progressive condition, serial monitoring is recommended. A recheck echocardiogram is recommended in 9 to 12 months. A recheck NT proBNP is recommended



PATIENT

Maki McGee

SPECIES

Canine

BREED

Akita

SEX

Spayed Female

AGE

6 Years

WEIGHT

73 pounds

INTERPRETED BY

Camden Rouben,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Arielle Roldan CVT

HOSPITAL NAME

Milford Animal
Hospital

REFERRING VET

Dr. Sean Grasso DVM

INVOICE

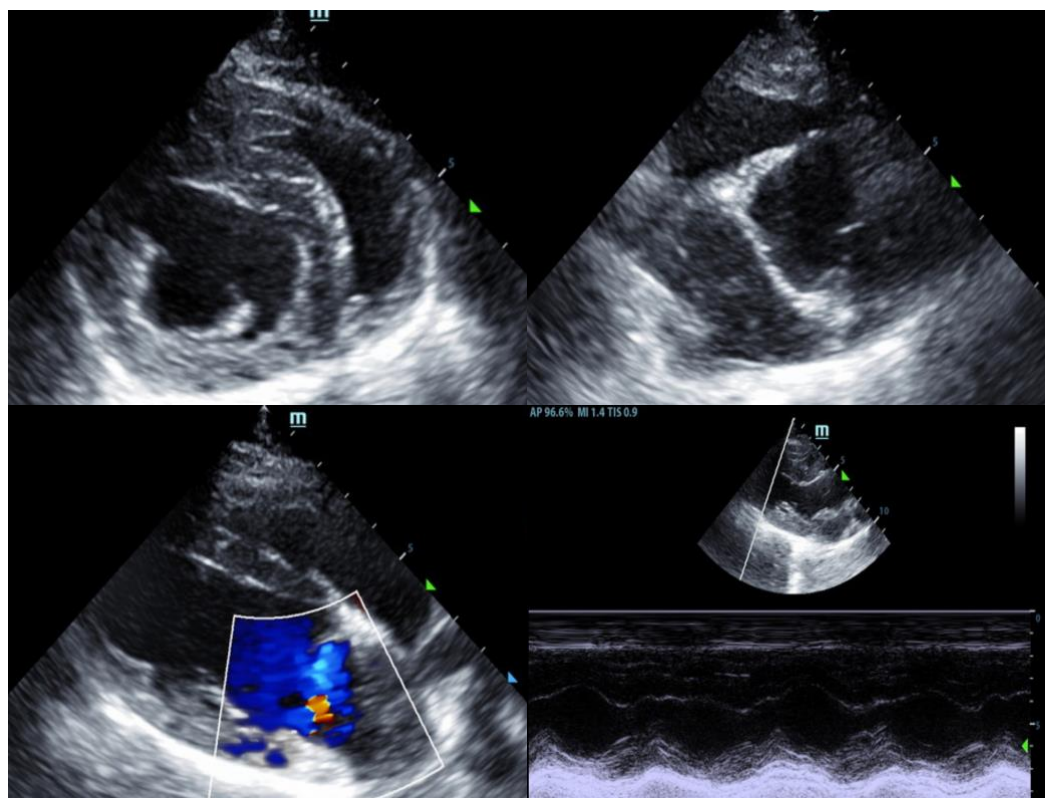
13054

DATE

01/09/2026

in 6 months. Other common causes of elevations in NT proBNP include significant azotemia, systemic hypertension, thyroid disease, neoplasia. A sooner recheck is recommended if the patient develops cardiovascular clinical signs or a heart murmur develops. Elective anesthetic procedures should be well tolerated. Blood pressure assessment should be performed in this particular patient. Standard perioperative fluid rate should be well tolerated.

Medications like dexmedetomidine, ketamine, and other alpha 2 agonists are best avoided. Anticholinergics can be used in the case of a clinically significant bradyarrhythmia. Activity restriction is not warranted in this particular patient.



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.

Camden Rouben, DVM, DACVIM (Cardiology)

info@SonoPath.com