



PATIENT

Vennice Spindor

SPECIES

Canine

BREED

Boxer

SEX

Female

AGE

15 Months

WEIGHT

24.2 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. McFarlen

HOSPITAL NAME

Van Isle VH

REFERRING VET

Dr. McFarlen

INVOICE

20561

DATE

1/13/23

PRESENTING CLINICAL SIGNS

History: Heart Murmur noted in August 2/6 systolic-asymptomatic Recently grade increased to 4/6. Owner was feeding grain free strong femoral pulses synchronous start on Pimobendan prior to echo Looking to spaying patient and want to know if additional medications are required. Patient was given 0.2 mg/kg torbugesic and 0.2 mg/kg Midazolam-minimally sedated and very noise sensitive

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

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	<1.3	28-40	40-100	<0.6
PATIENT	--	2.77	NM	1.4	30	58	0.4
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				
PATIENT	--	2.09	1.06	--	2.68	4.01	--

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate methods of LA evaluation. Trivial mitral insufficiency was noted, centralized with minimal jet. The **left ventricle** presented thicknesses with linear contour and was not dilated nor restricted. The **myocardium** presented normal echogenicity without subjective evidence of significant fibrotic or ischemic disease. **Contractility** of the ventricular walls was adequate and in normal range for this patient evidenced by the fractional shortening measurement and subjective evaluation of the different regions of the myocardium. Mild increased left ventricular outflow velocity noted. The **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted. Minor tricuspid insufficiency was noted. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. Trivial pulmonic insufficiency was noted. No visible **pericardial** or free pleura fluid was noted. The cranial **mediastinum and pericardial and extra-cardiac regions** were free of masses in the visible window. Occasional arrhythmia was noted.

ULTRASONOGRAPHIC FINDINGS

- Trivial mitral and tricuspid insufficiency, essentially normal variant
- Minor increased left ventricular outflow velocity, typical for the breed
- Occasional arrhythmia

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS



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Baseline EKG, or better yet Holter monitor would be ideal with cardiologist review. This may be obtained from our office. Normal structure and function with arrhythmogenic disease, to be further defined by Holter monitor, ideally. No cardiac medication recommended at this time. Contractility appears to be fairly adequate for this breed. No direct effect from the grain free diet at this point, however, nutritional assessment is recommended.

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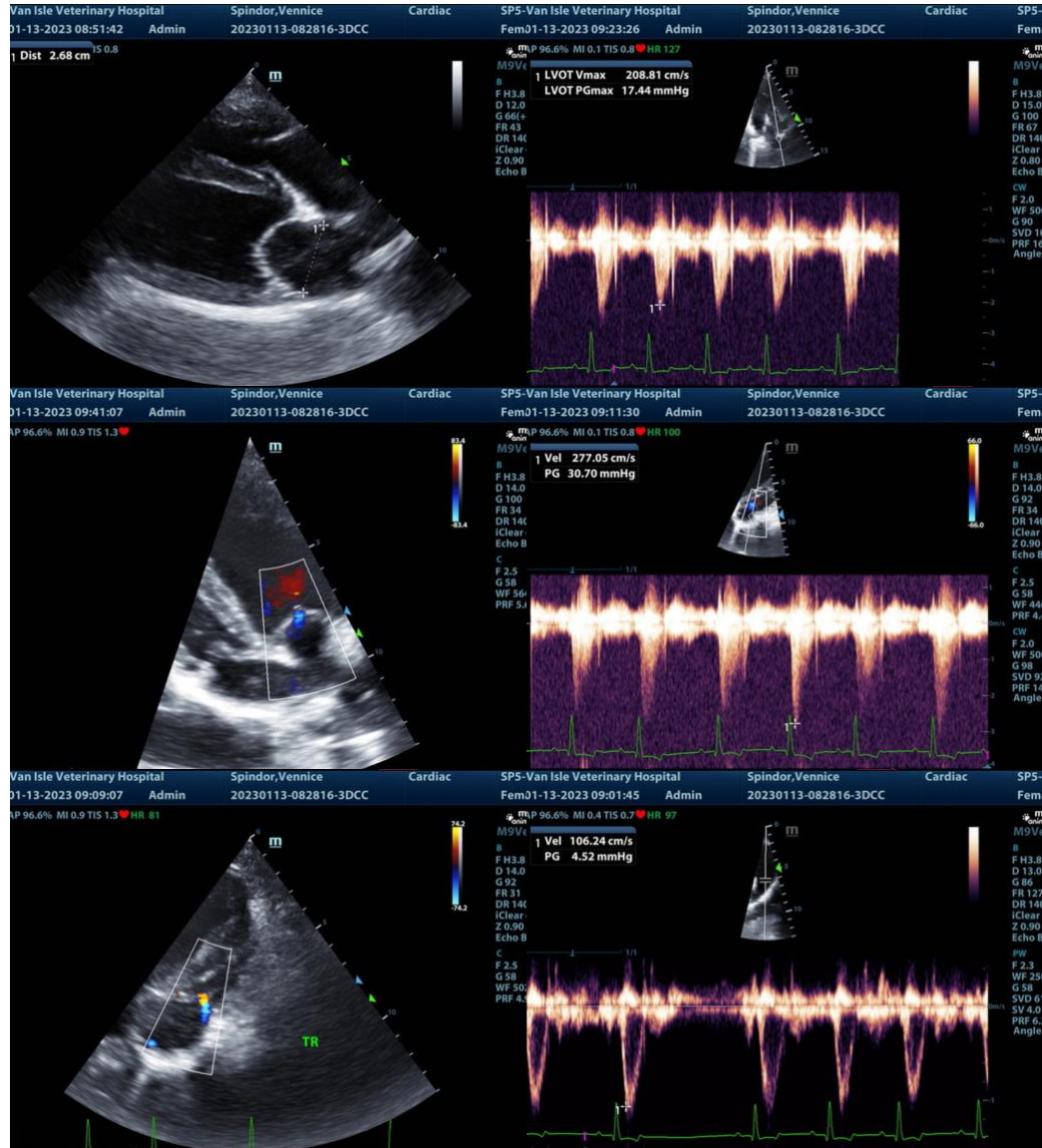
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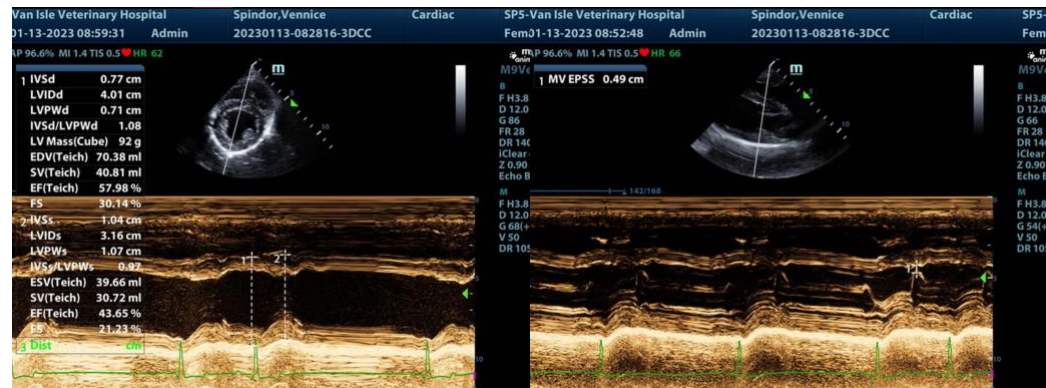
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
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