



PATIENT

Pedro Whitty

SPECIES

Canine

BREED

Chihuahua

SEX

Neutered male

AGE

14 years

WEIGHT

11 lbs

PRESENTING CLINICAL SIGNS

History: Grade 4/6 murmur, coughing, dental disease. Echo prior to surgery
 Abnormal PE/Chem/CBC/UA Results: BP 123/99(111), 147/103(132), 155/102(116)

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

The echocardiogram in this patient demonstrated enlarged **left atrial** size based on 3 different LA measurement methods. Chamber volumes and echogenicity were normal. The cranial and caudal **mitral** valve leaflets presented vegetative thickening consistent with endocardiosis. Prolapse of the anterior mitral valve leaflet was noted. Doppler indicated measurable insufficiency. The **left ventricle** presented normal 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. The **left ventricular outflow** tract demonstrated normal laminar flow and subjective structural integrity. The **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted or chamber overload. **Tricuspid** valvular assessment demonstrated adequate linear morphology. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **Pulmonic** tract assessment revealed normal valve structure, laminar flow, and diameter (approx. 1:1 pa/ao ratio). No visible **pericardial** or free pleura fluid was noted. No echographically detectable evidence of infiltrative disease was visible. The cranial **mediastinum and pericardial regions** were free of masses in the visible window.

INTERPRETED BY

Eric Lindquist, DMV
 DABVP, Cert. IVUSS

IMAGING PERFORMED BY

JK

HOSPITAL NAME

Hamburg VC

REFERRING VET

Dr. Branning

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	> 5.0		1.6	1.9	44	77	NM
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT	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	101		0.6	11 lbs	4.0	3.47	

INVOICE

42149

DATE

1/16/23



PATIENT

ULTRASONOGRAPHIC FINDINGS

Pedro Whitty

Stage B2 valvular disease with left atrial enlargement.

SPECIES

Canine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

BREED

Chihuahua

I do not recommend anesthesia in this patient at this time. I am concerned for emerging C1 valvular disease given the cough. However, this is dependent upon radiographic findings. I recommend ace inhibitor at 0.5 mg/kg s.i.d. progressing to b.i.d., Pimobendan at 0.3 mg/kg b.i.d. and Lasix at 1-2 mg/kg b.i.d. A recheck BUN, creatinine, blood pressure measurements, chest radiographs and echocardiogram is recommended in 10 days. Basal respiratory rate target is less than 25/minute and no cough. Concurrent bronchial disease may be an issue depending on radiographic findings. Advanced stage B2-C1 valvular disease.

SEX

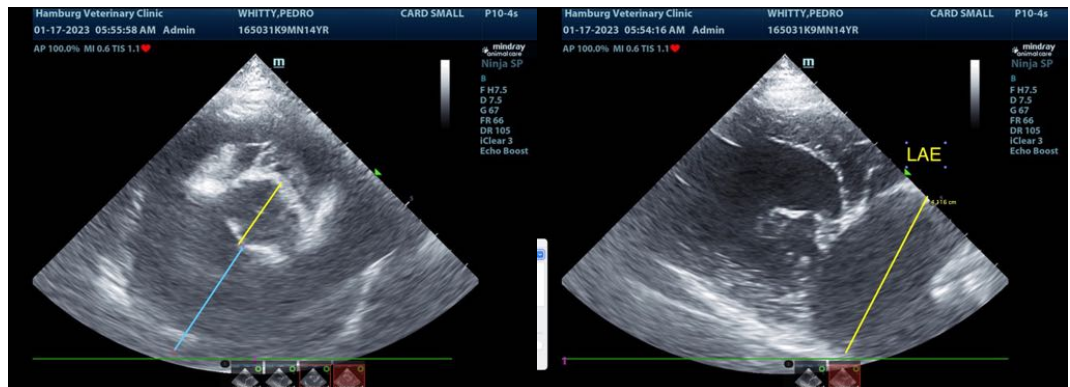
Neutered male

AGE

14 years

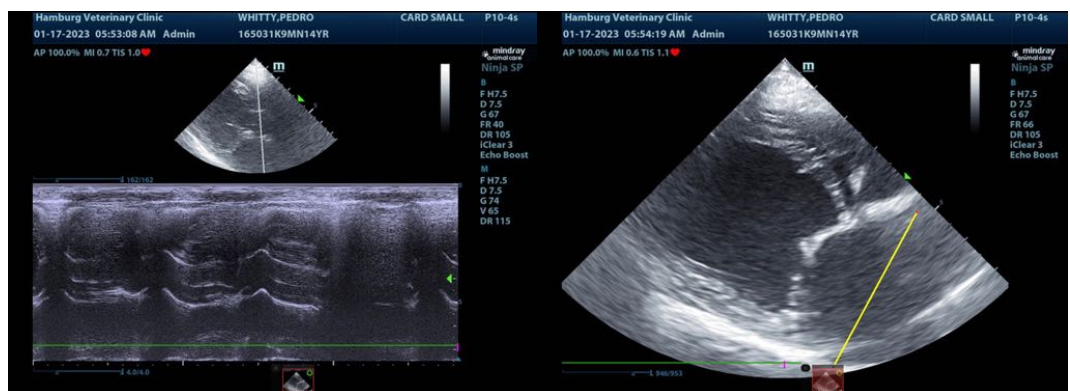
WEIGHT

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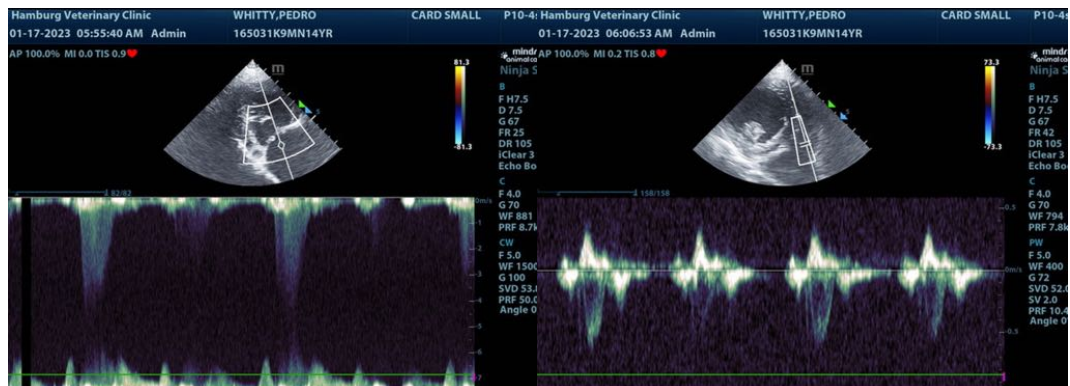
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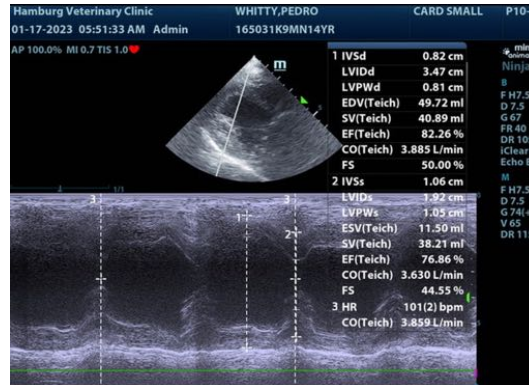
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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