



PATIENT

Ali Alameda

SPECIES

Canine

BREED

Poodle Mix

SEX

Spayed Female

AGE

12 Years

WEIGHT

23 pounds

INTERPRETED BY

Eric Lindquist, DMV,
DABVP (Canine &
Feline), Cert. IVUSS

IMAGING PERFORMED BY

Laura Klaassen

HOSPITAL NAME

Animal Care Group of
Lake Oswego

REFERRING VET

Dr. Rebecca Juvenal

INVOICE

13506

DATE

01/30/26

PRESENTING CLINICAL SIGNS

- heart murmur found in preparation for dental cleaning

Abnormal PE/Chem/CBC/UA Results: labs pending

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	--	--	1.3	1.6	45	80	0.1
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (lbs)	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	NM	--	--	23.0	3.6	3.8	--

Cardiac Presentation

The **left atrial** and **left ventricular** internal diameters were slightly excessive in this patient. Chamber volumes and echogenicity were normal. Significant prolapse of the anterior **mitral** valve leaflets was noted. Doppler indicated measurable insufficiency. The **myocardium** presented normal echogenicity without subjective evidence of significant fibrotic or ischemic disease. **Contractility** of the ventricular walls was adequately compensatory. 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. No overt arrhythmogenic activity was noted during the exam, however, a Holter monitor would be ideal in this case.

ULTRASONOGRAPHIC FINDINGS

- Partially compensated stage B2 valvular disease.



PATIENT

Ali Alameda

SPECIES

Canine

BREED

Poodle Mix

SEX

Spayed Female

AGE

12 Years

WEIGHT

23 pounds

INTERPRETED BY

Eric Lindquist, DMV,
DABVP (Canine &
Feline), Cert. IVUSS

IMAGING PERFORMED BY

Laura Klaassen

HOSPITAL NAME

Animal Care Group of
Lake Oswego

REFERRING VET

Dr. Rebecca Juvenal

INVOICE

13506

DATE

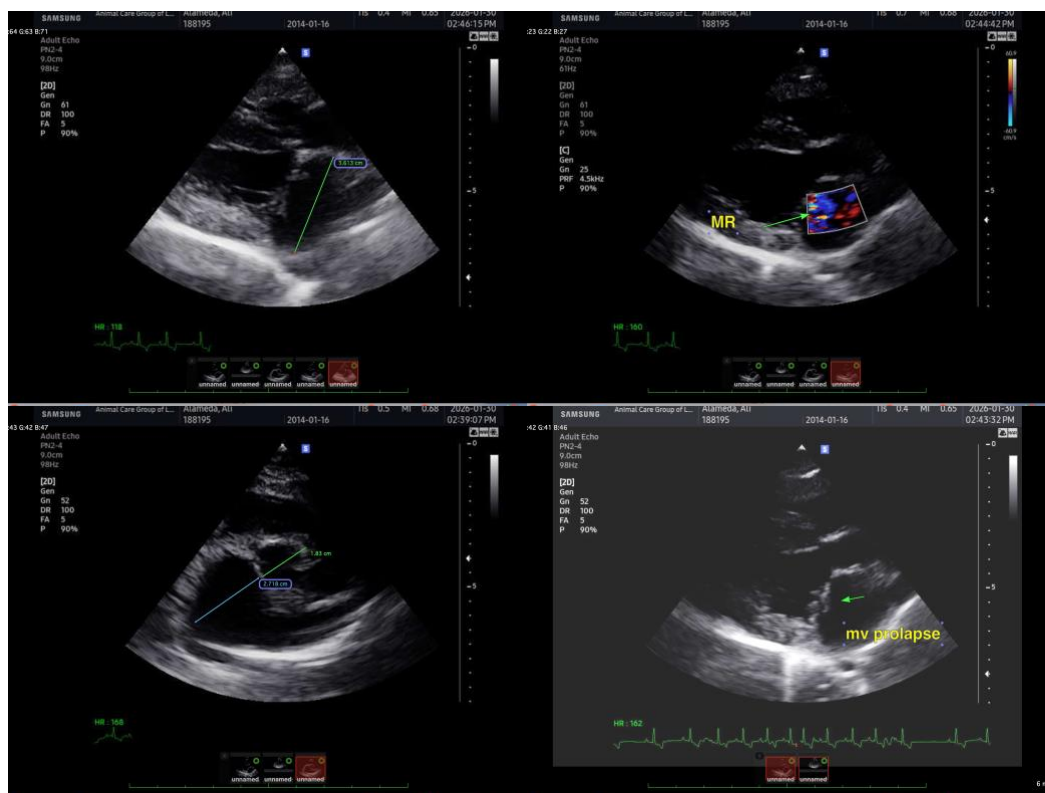
01/30/26

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Blood pressure measurements are indicated. There is mild anesthetic risk in this patient. Torbutrol premed, Propofol induction and Isoflurane maintenance is recommended.

The heart has minor volume overload and is working to compensate for the valvular insufficiency. Target respiratory rate is < 20 resp/minute after therapy. After initiating or adjusting therapy, I recommend recheck on the clinical exam, BUN, Creatinine, USG, Chest radiographs & Blood pressure in 5-7 days. Recheck echo in 6 months, earlier if clinical decompensation is occurring. Minor anesthetic risk for a brief procedure at this time. Repeat preanesthetic echo is ideal if anesthesia is eventually necessary. A suggested anesthetic combination would involve Torbutrol premed, propofol induction, Isoflurane maintenance or equivalent protocol.

Long term management with Pimobendan, ACE inhibitor +/- Spironolactone could be considered. The anterior prolapse of the anterior mitral valve leaflet is concerning. There is no consensus on different management based on this finding, however personally, this could be a precarious issue under anesthesia. I strongly recommend avoiding excessive excitement and tachycardia on induction and on reanimation in this patient.





PATIENT

Ali Alameda

SPECIES

Canine

BREED

Poodle Mix

SEX

Spayed Female

AGE

12 Years

WEIGHT

23 pounds

INTERPRETED BY

Eric Lindquist, DMV,
DABVP (Canine &
Feline), Cert. IVUSS

IMAGING PERFORMED BY

Laura Klaassen

HOSPITAL NAME

Animal Care Group of
Lake Oswego

REFERRING VET

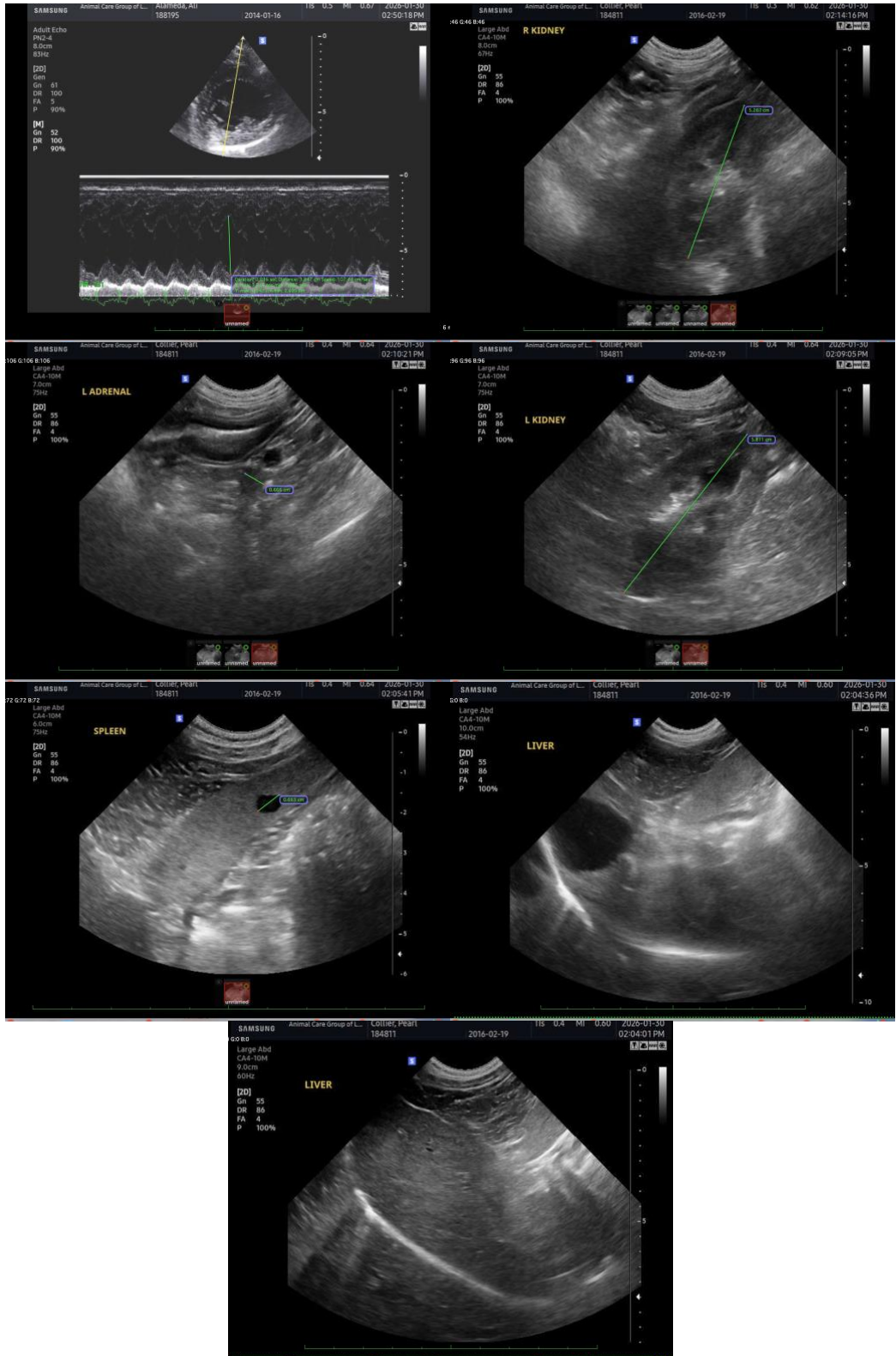
Dr. Rebecca Juvenal

INVOICE

13506

DATE

01/30/26





PATIENT

Ali Alameda

SPECIES

Canine

BREED

Poodle Mix

SEX

Spayed Female

AGE

12 Years

WEIGHT

23 pounds

INTERPRETED BY

Eric Lindquist, DMV,
DABVP (Canine &
Feline), Cert. IVUSS

IMAGING PERFORMED BY

Laura Klaassen

HOSPITAL NAME

Animal Care Group of
Lake Oswego

REFERRING VET

Dr. Rebecca Juvenal

INVOICE

13506

DATE

01/30/26

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.

Eric Lindquist, DMV, DABVP (Canine & Feline), Cert. IVUSS

info@SonoPath.com