



**PATIENT PRESENTING CLINICAL SIGNS**

**Rex Cho** Anesthetized with Isoflurane for mass removal and blood pressure became erratic, SPO2 plummeted and CO2 went up. Anesthesia was discontinued for further workup. Prior ECG and chest radiographs were all WNL. Induced with Ket/Val, maintained on Isoflurane.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: ALP 661, chol. 381, trigs. 788, PrecPSL 166.

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

**BREED**

Jack Russell Terrier

**SEX**

Neutered Male

**AGE**

11 Years

**WEIGHT**

23 Pounds

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		1.2	1.3	1.2	31	60	0.27
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	90		1.12		2.24	2.84	

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Kely Vazquez

**HOSPITAL NAME**

Midland Park VH

**REFERRING VET**

Dr. John Shokoff

**Cardiac Presentation**

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate methods of LA evaluation. The **mitral** valve was slightly vegetative, not a clinical issue at this time. 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. 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. Trivial **tricuspid** insufficiency noted. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **Pulmonary outflow** 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. The cranial **mediastinum and pericardial and extra-cardiac regions** were free of masses in the visible window.

**ULTRASONOGRAPHIC FINDINGS**

- Normal echocardiogram

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No evidence of cardiac disease responsible for the history. Blood pressure measurements warrants. Abdominal sonogram warranted to assess for possible adrenal disease or other pathology.



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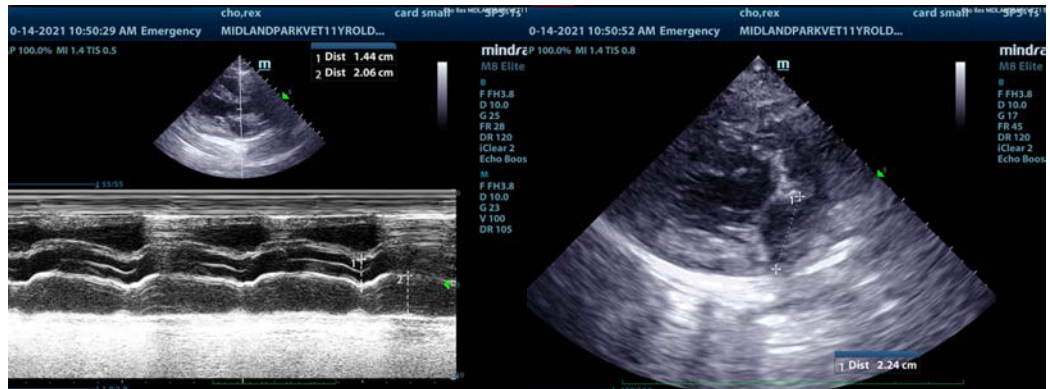
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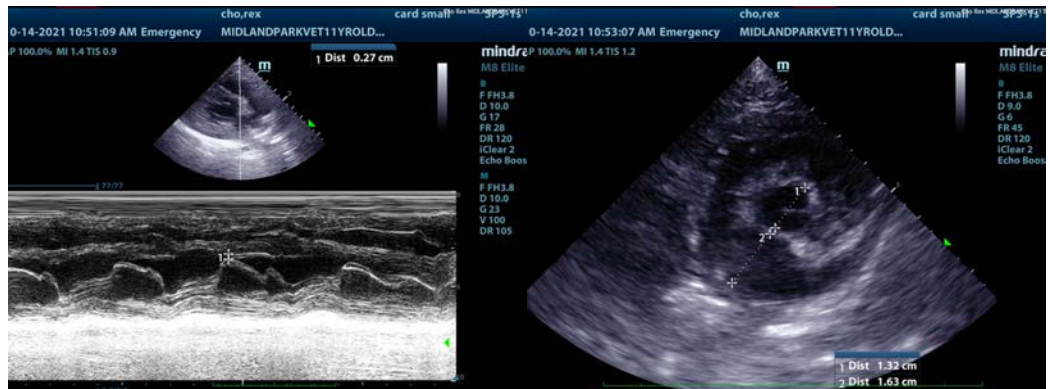
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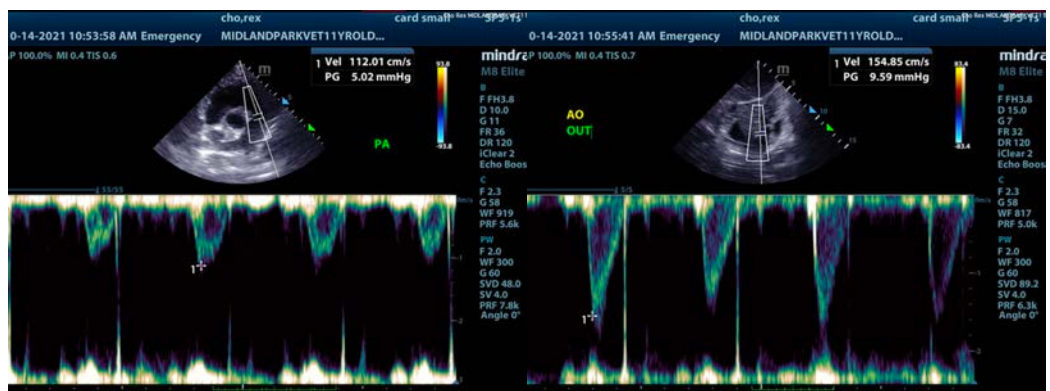
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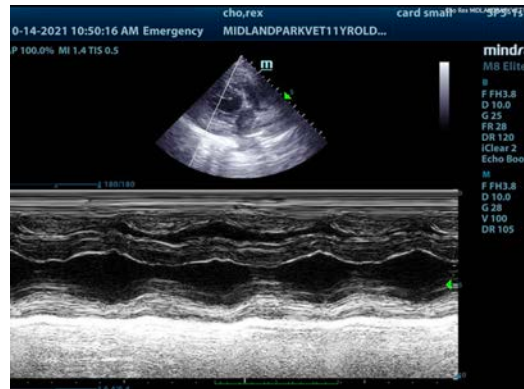
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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