



PATIENT PRESENTING CLINICAL SIGNS

Ollie Campbell

History: First time seeing this pet was for an echo as couldn't get in to see cardiologist til July 2022! Cough since September. No other symptoms. no heart murmur. Radiographs taken by referring veterinarian who recommended owner see cardiologist asap.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Radiographs: lateral and dorsal deviation of trachea (Performed by another practice)- attached.

BREED ULTRASONOGRAPHIC EXAMINATION OF THE HEART

Puggle

SEX

Neutered Male

AGE

12 Years

WEIGHT

50 lbs

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	--	--	1.15	1.4	31	60	0.1
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	--	--	--	--	3.3	3.46	--

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate methods of LA evaluation. The cranial and caudal **mitral** valve leaflets presented normal linear structure, extension in systole, and union in diastole with normal kinesis. 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** is slightly prominent, essentially normal variant for the breed. No evidence of masses was noted. **Tricuspid** valvular assessment demonstrated adequate linear morphology and kinesis. 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. Hepatic veins were not dilated.

IMAGING PERFORMED BY

Dr. Louise Mandeville

HOSPITAL NAME

Bettervet

REFERRING VET

Dr. Louise Mandeville

INVOICE

12523

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11/13/21

ULTRASONOGRAPHIC FINDINGS

- Normal echocardiogram



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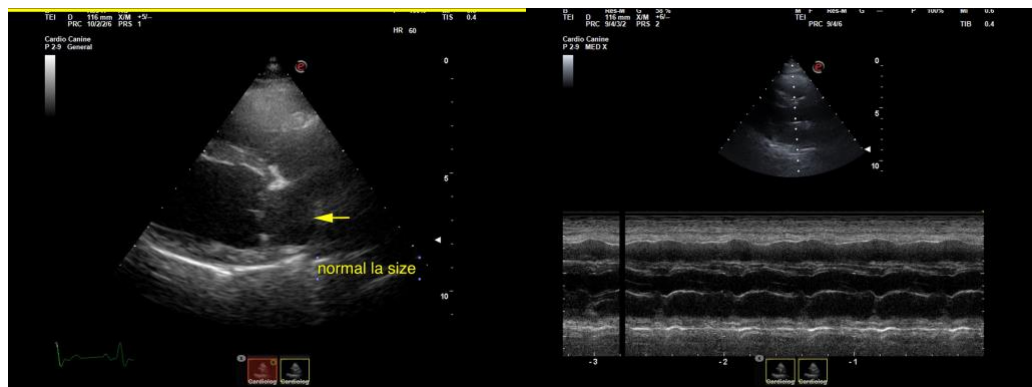
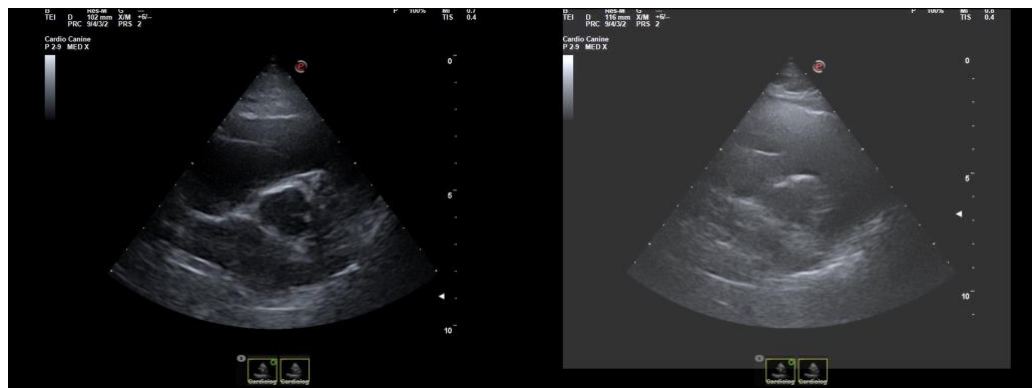
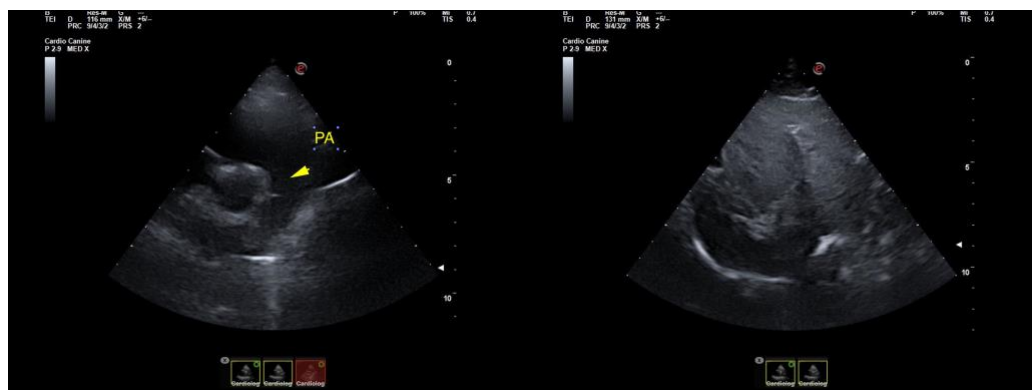
Bettervet

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The cough is non-cardiogenic in this patient. No cardiac medications recommended. Primary respiratory protocol warranted based on the radiographic findings. No evidence of passive congestion or right sided heart failure.



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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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