



PATIENT PRESENTING CLINICAL SIGNS

Elliot Stretton History: V/VI systolic murmur, issues breathing Current meds: Lasix 12.5mg 1/2 BID, vetromedin 2.5mg 1/2 BID
Abnormal PE/Chem/CBC/UA Results: BUN 38

SPECIES

Canine

BREED

Terrier Mix

SEX

Neutered male

AGE

14 years

WEIGHT

9.8 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jessica Miller, RDMS

HOSPITAL NAME

Animal Care Center of
Flanders

REFERRING VET

Dr. Hallihan

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

The **left atrium** was mildly enlarged and mildly dilated. Prolapse of the anterior **mitral** valve leaflet was noted. Prolapse of the anterior mitral valve leaflet was noted with vegetative changes. The **left ventricle** was persistently dilated in this patient. 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** insufficiency was noted at 2.05 m/sec. 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.

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	6.01	2.05	1.53	1.55	46	79	0.2
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	134	1.29	0.77	9.8 lbs	2.85 max	3.26	

INVOICE ULTRASONOGRAPHIC FINDINGS

92798 Left atrial enlargement.

Mitral insufficiency.

DATE

11/2/21



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INVOICE

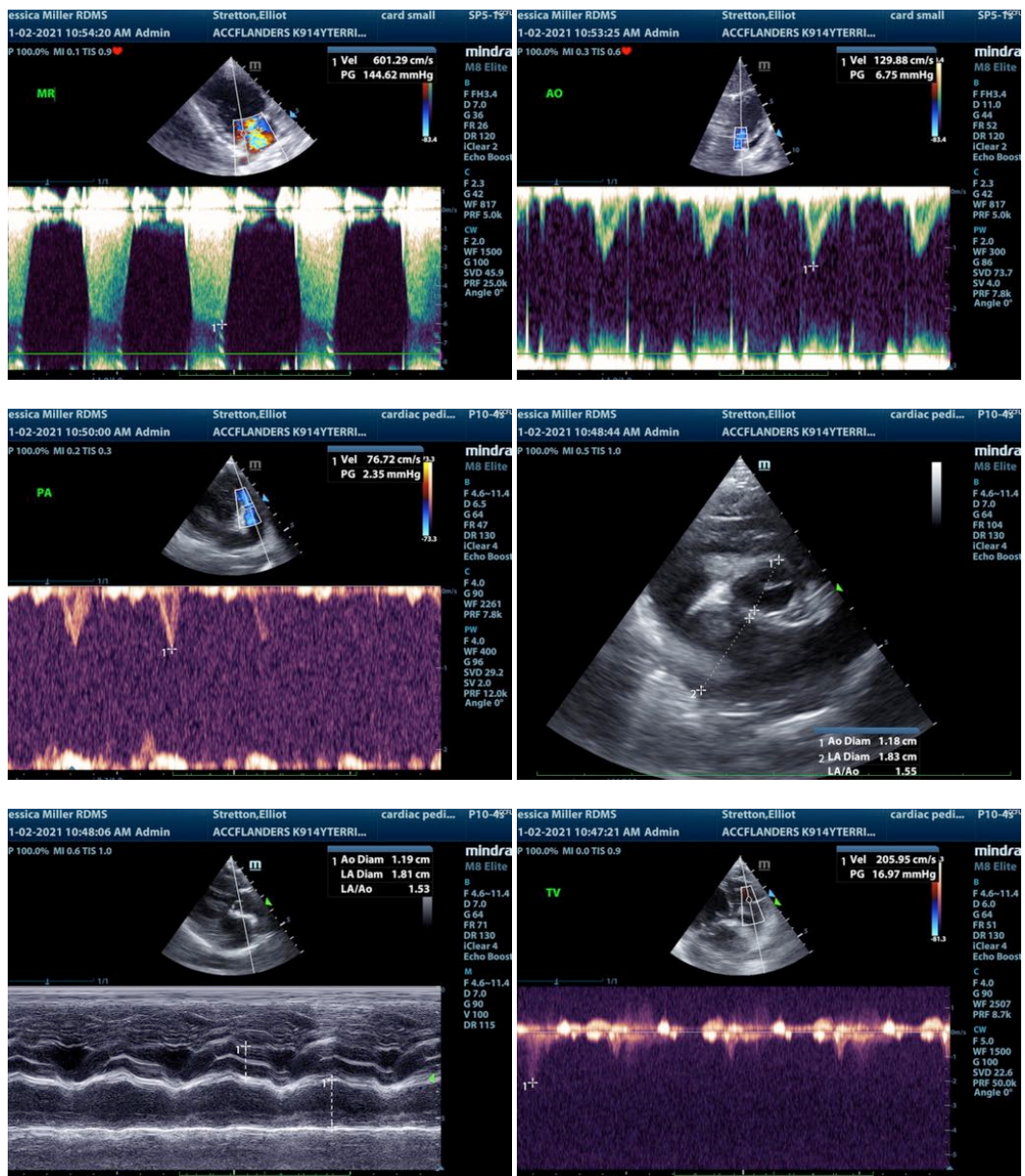
92798

DATE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend refinement of therapy by adding Spironolactone at 1-2 mg/kg b.i.d. ensuring systolic blood pressure is < 160. Ace inhibitor therapy should also be considered at 0.5 mg/kg s.i.d. progressing to b.i.d. Reassessment of the echocardiogram is recommended in a month. Assessment of BUN, creatinine, USG, chest radiographs and blood pressure as well as clinical exam is ideal in 7-10 days. Basal respiratory rate should be <20/min.





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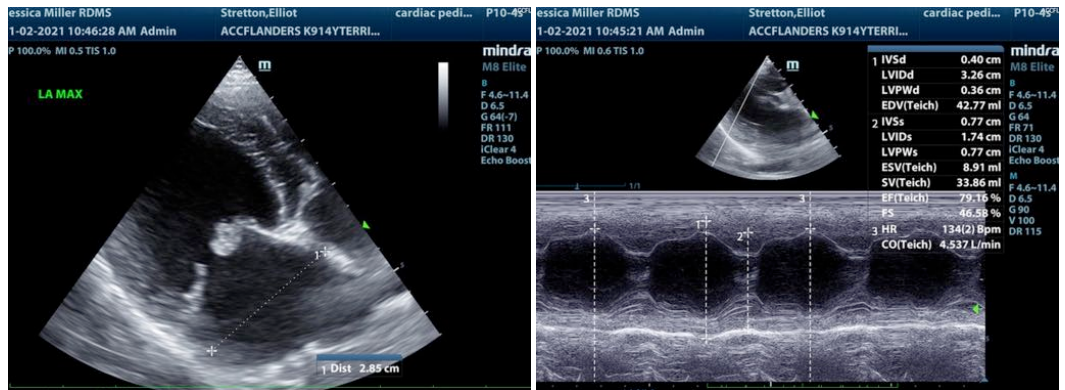
Dr. Hallihan

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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
info@SonoPath.com