

**PATIENT PRESENTING CLINICAL SIGNS**

Winnie Schau

History: Murmur 3/6 systolic intensity on the basilar left and also on the central Right with no palpable thrill . No arrhythmia or congestion noted, crt<2 seconds and moist pink. Sedated patient with Midazolam (0.2mg/kg) and Hydromorphone (0.2mg/kg) through IM injection.

**SPECIES**

Abnormal PE/Chem/CBC/UA Results: asymptomatic , murmur found at vaccine appointment

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

**BREED**

Boston Terrier

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 normal thicknesses with linear contour and was not dilated nor restricted. The ventricular septum in this patient revealed a left to right ventricular septal defect. The ventricular septum itself was heterogenous and irregular. Concurrent aortic insufficiency was noted. Moderate **aortic insufficiency** was noted without secondary changes. The **right atrium** and auricle revealed normal size, structure and content. 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.

**SEX**

Female

**AGE**

5 months

**WEIGHT**

7 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. McFarlen

**HOSPITAL NAME**

Van Isle VH

**REFERRING VET**

Dr. McFarlen

| 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                   |               |               | 1.1                 |                         | 30                                | 80   | 0.29                                       |
| 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             | BELOW                   | BELOW                             | BELOW                                      | BELOW                                      |
| PATIENT                   |               | 1.4           | 0.8                 | 7 kg                    | 2.28                              | 2.65                                       |  |

**ULTRASONOGRAPHIC FINDINGS**

**INVOICE**

Small ventricular septal defect, small at 1-2 mm.

42719

Concurrent aortic insufficiency.

**DATE**

11/25/22



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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

This may close during the growing phase of this patient. No specific therapy is recommended at this time. A recheck sonogram is recommended at a full year of age assuming the patient does not have any clinical signs. If anesthesia is to be performed prophylactic antibiotics 5 days prior and 5 days post procedure is recommended.

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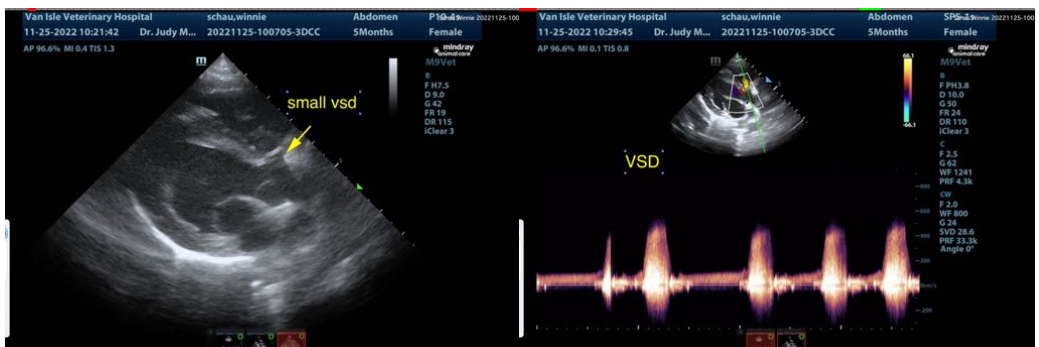
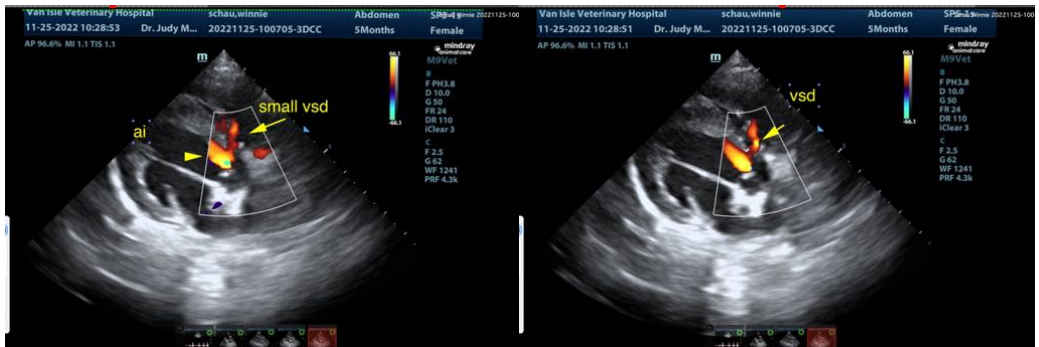
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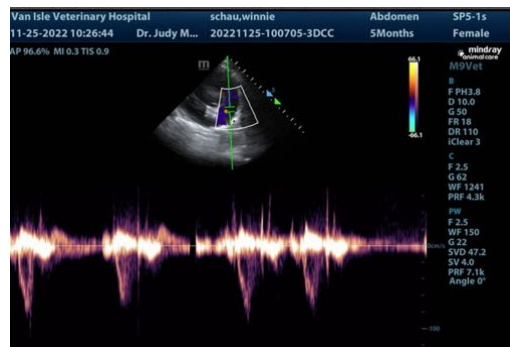
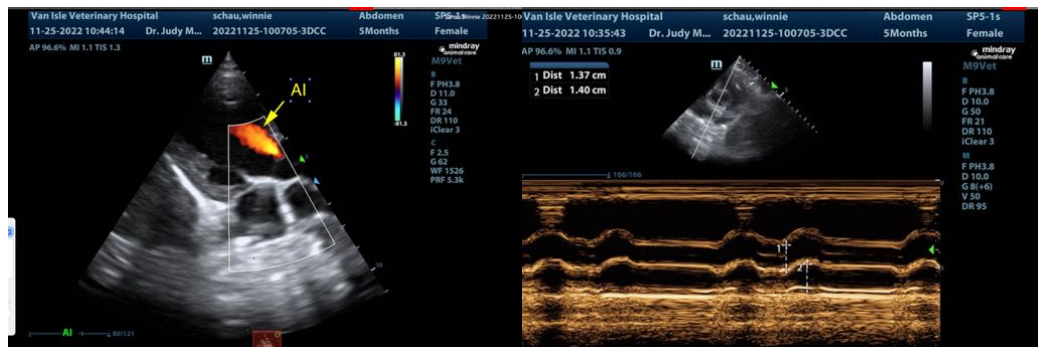
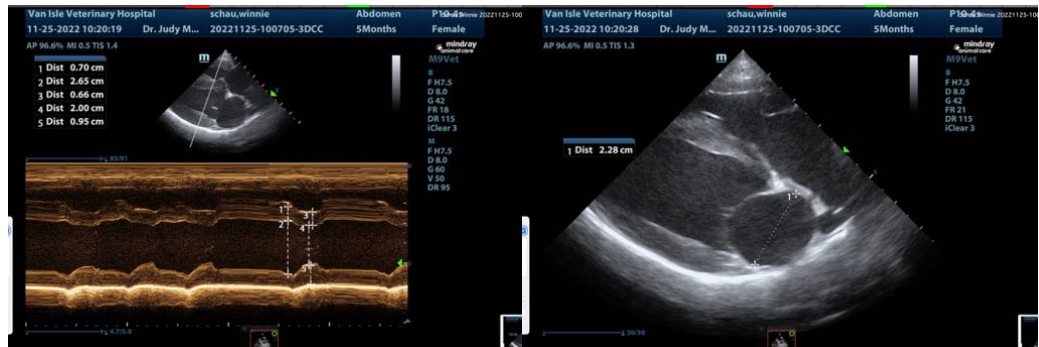
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



**PATIENT**

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**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
info@SonoPath.com

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