



PATIENT

Jasmine Mangini

SPECIES

Canine

BREED

Morkie

SEX

Spayed Female

AGE

12 Years

WEIGHT

10 Pounds

PRESENTING CLINICAL SIGNS

History: Labored breathing. R/O PHT vs other. Current meds: Enalapril, Vetoryl

Abnormal PE/Chem/CBC/UA Results: Pending

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

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	<1.3	28-40	40-100	<0.6
PATIENT	5.5	3.45	1.3	1.44	44	78	0.24
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	132	1.62	1.38	--	2.0	2.27	

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Parsippany Troy Hills

REFERRING VET

Dr. Dulude

INVOICE

17693

DATE

11/4/22

Cardiac Presentation

The cardiac presentation in this patient presented persistent mitral and tricuspid insufficiency. Left atrial size was contained. The tricuspid insufficiency velocity has increased in this patient. Hepatic veins were dilated consistent with moderate pulmonary hypertension. Mild comet tail lung pattern was noted. Right atrial to left atrial ratio was increased. Right atrial enlargement was noted.

ULTRASONOGRAPHIC FINDINGS

- Mitral and tricuspid insufficiency with moderate pulmonary hypertension
- Hepatic vein dilation
- Comet tail lung pattern

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the patient history and the hypercoagulable state provided by Cushings disease, I'm concerned for thromboembolic events in this patient. If the labored breathing is constant, systemic hypertension, thromboembolic events, primary respiratory disease are all possible. If the labored breathing is based on exercise intolerance, then pulmonary hypertension may be playing a role in which Sildenafil would be indicated at 1 mg/kg BID, increasing to 1.5 mg/kg BID after 2 weeks. BUN, creatinine and blood pressures should all be monitored at that time. Otherwise, treatment should be based on radiographic findings. Antihypertensive therapy should be increased if systolic blood pressure is >160. Recheck echocardiogram in 6 months or earlier if indicated.



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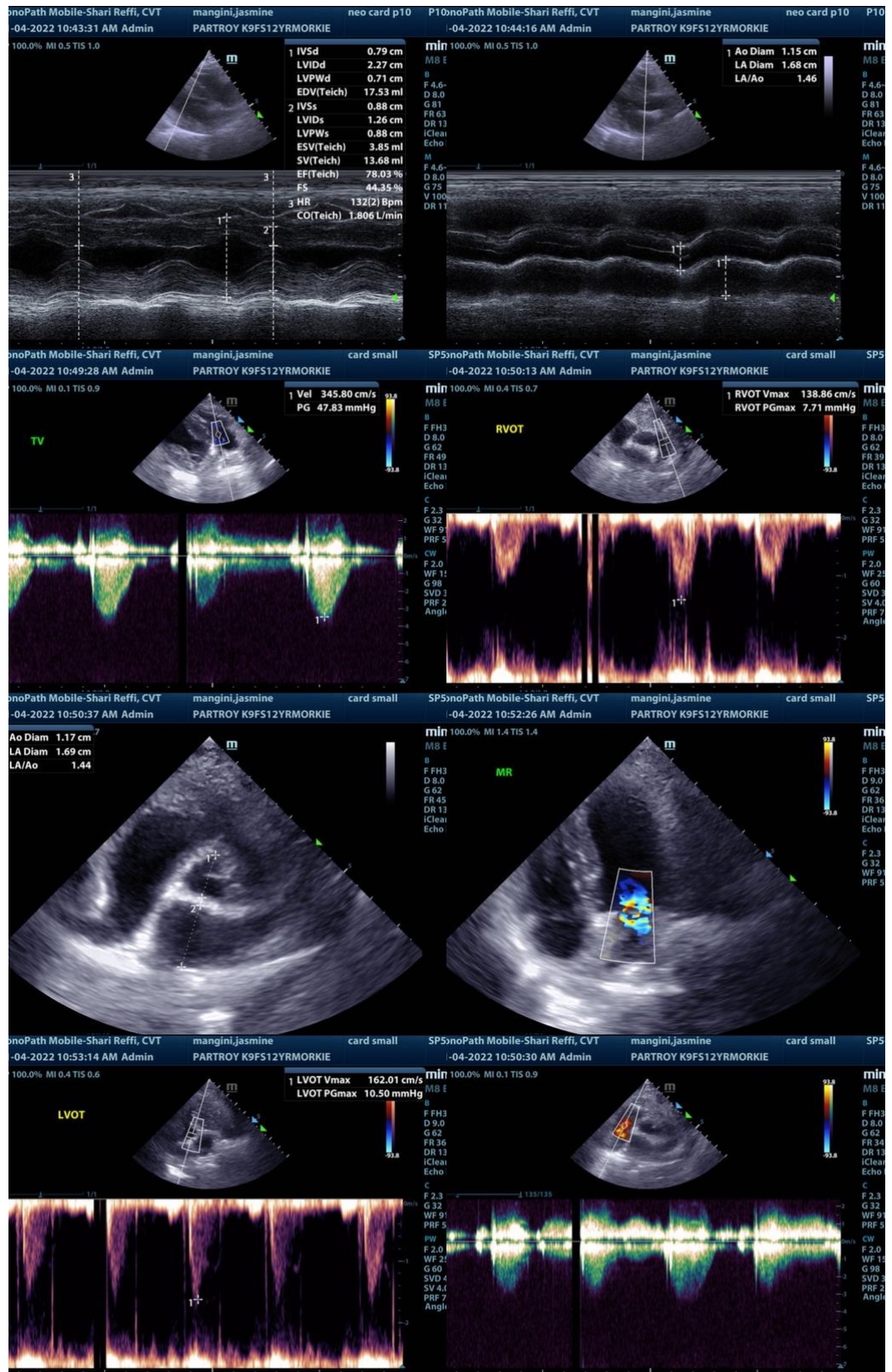
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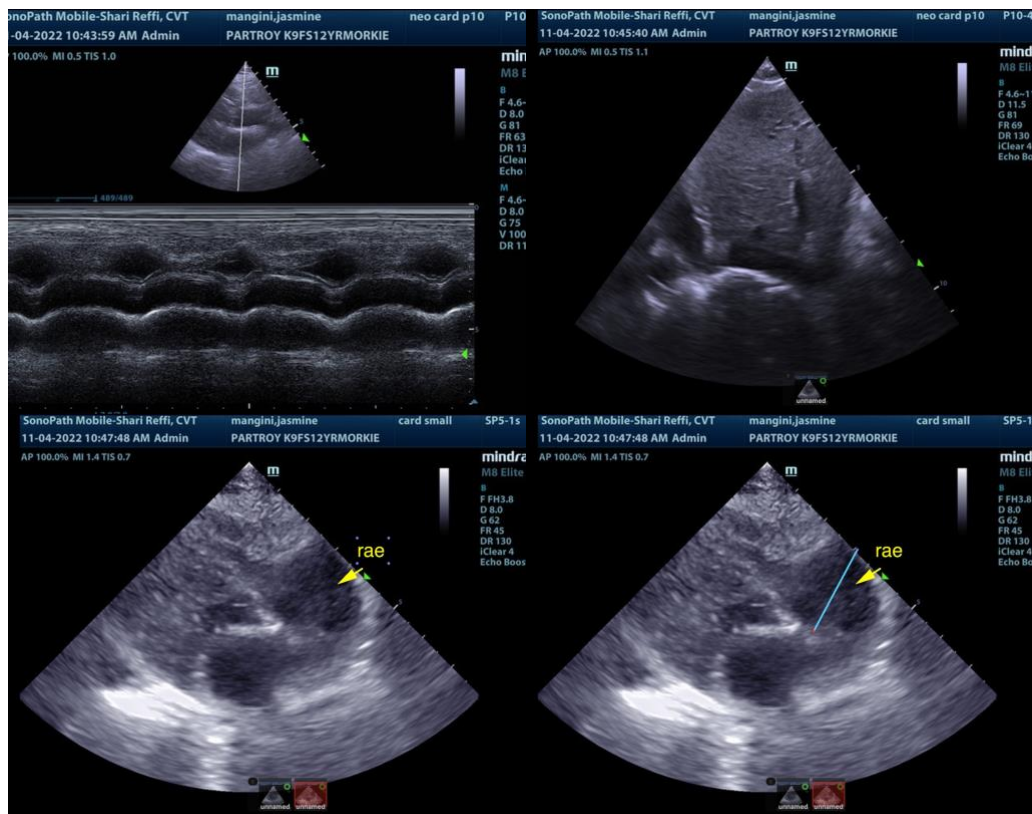
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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