



PATIENT

Chopper Ruiz

SPECIES

Canine

BREED

Mixed

SEX

Neutered Male

AGE

15

WEIGHT

42 lbs

PRESENTING CLINICAL SIGNS

Vomiting blood, lethargy, weight loss
Abnormal PE/Chem/CBC/UA Results: Labs attached

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (M-Mode)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	Up to 1.6	28-40	40-100	<0.6
PATIENT			NM	1.0	30		NM
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LAD LA MAX 4 Chamber	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				3.0	2.8	

INTERPRETED BY

Eric Lindquist, DMV, DABVP (CFM), Cert. IVUSS

IMAGING PERFORMED BY

Dr. Travis Cerf

HOSPITAL NAME

Veterinary Center of Hardyston

REFERRING VET

Dr. Travis Cerf

INVOICE

72502

DATE

12/11/25

Cardiac Presentation

The left atrium and left ventricle were volume contracted. The cranial and caudal mitral valve leaflets presented vegetative thickening consistent with endocardiosis. Doppler indicated measurable insufficiency. Contractility was slightly subnormal. 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. Minor tricuspid insufficiency noted. 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).

Free fluid noted through the diaphragm. A density was noted in the extracardiac space adjacent to the diaphragm, measuring approximately 6.0 cmx 3.8 cm, presumed to be of lung origin. However, it cannot be defined. Pleural effusion noted with areas of lung consolidation and nodular omentum.

ULTRASONOGRAPHIC FINDINGS

- Volumed contracted heart with Stage B1 valvular disease.
- Extracardiac neoplasia involving lung and pleura.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Assessment for shock recommended in this patient. Ultrasound guided FNA of the tissue and pleurocentesis and cytospin recommended. Abdominal sonogram warranted to assess for related disease, yet thoracic neoplasia is evident. Chest CT would be appropriate as well.



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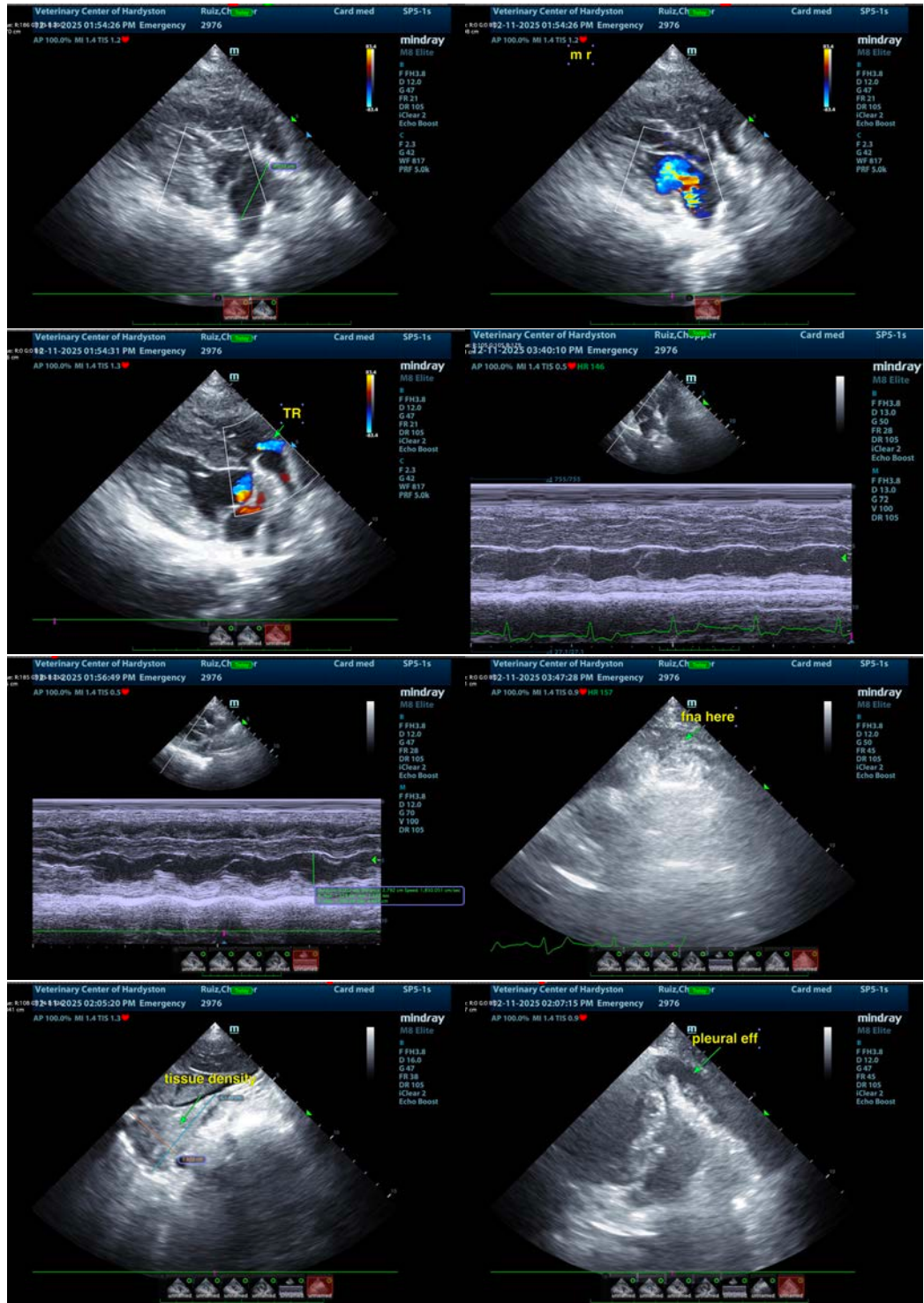
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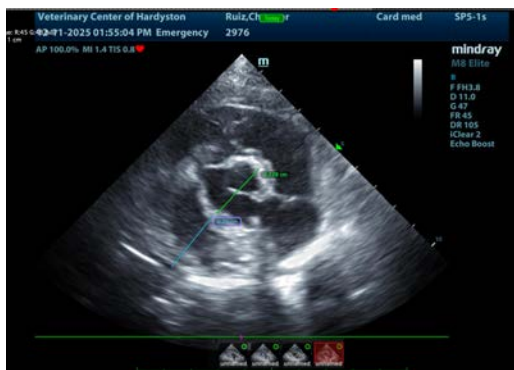
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Eric Lindquist, DMV, DABVP(CFM), Cert. IVUSS,
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