



**PATIENT PRESENTING CLINICAL SIGNS**

Kai Anderson History: Concern for heart base mass. Coughing for 3 months. No current meds.

**SPECIES**

Canine

**BREED**

Shepherd Mix

**SEX**

Male

**AGE**

8 years

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 different LA measurement methods. Chamber volumes and echogenicity were normal. The cranial and caudal **mitral** valve leaflets presented vegetative thickening consistent with endocardiosis. The mitral insufficiency jet was centralized and mild. Doppler indicated measurable insufficiency. Mild **left ventricular** hypocontractility was noted in this patient. However, internal diameter was normal. 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** valvular assessment demonstrated adequate linear morphology. 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.

**WEIGHT**

51 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

Dr. Ascot

**INVOICE**

94516

**DATE**

12/13/21

CANINE	MR	TR	LA/AO	LA/AO	FS	EF	EPSS
<b>CARDIAC PARAMETERS</b>	<b>VMAX</b> (m/s)	<b>VMAX</b> (m/s)	(Boon method)	(Heart Base; Swe)	(%)	(%)	(cm)
<b>NORMAL PARAMETER</b>	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
<b>PATIENT</b>	5.5		0.9	0.96	30	58	0.41
CANINE	HR	AV	PV	BODY WEIGHT	LA	LVIDd	LVIDs
<b>CARDIAC PARAMETERS</b>	(BPM)	<b>VMAX</b> (m/s)	<b>MAX</b> (m/s)		2D short axis Base view (cm)	Avg; 2D and m-mode short axis (cm)	Avg; 2D and m-mode short axis (cm)
<b>NORMAL PARAMETER</b>	50-100	0.7-1.7	0.7-1.6				
<b>PATIENT</b>	120	0.9	0.6	51 lbs	3.59 max	3.8	

**ULTRASONOGRAPHIC FINDINGS**

Mitral and tricuspid insufficiency.  
No evidence of right auricular masses.  
Minor aortic insufficiency.  
Diffuse pulmonary microconsolidations.  
Hypocontractility, likely due to sedation.



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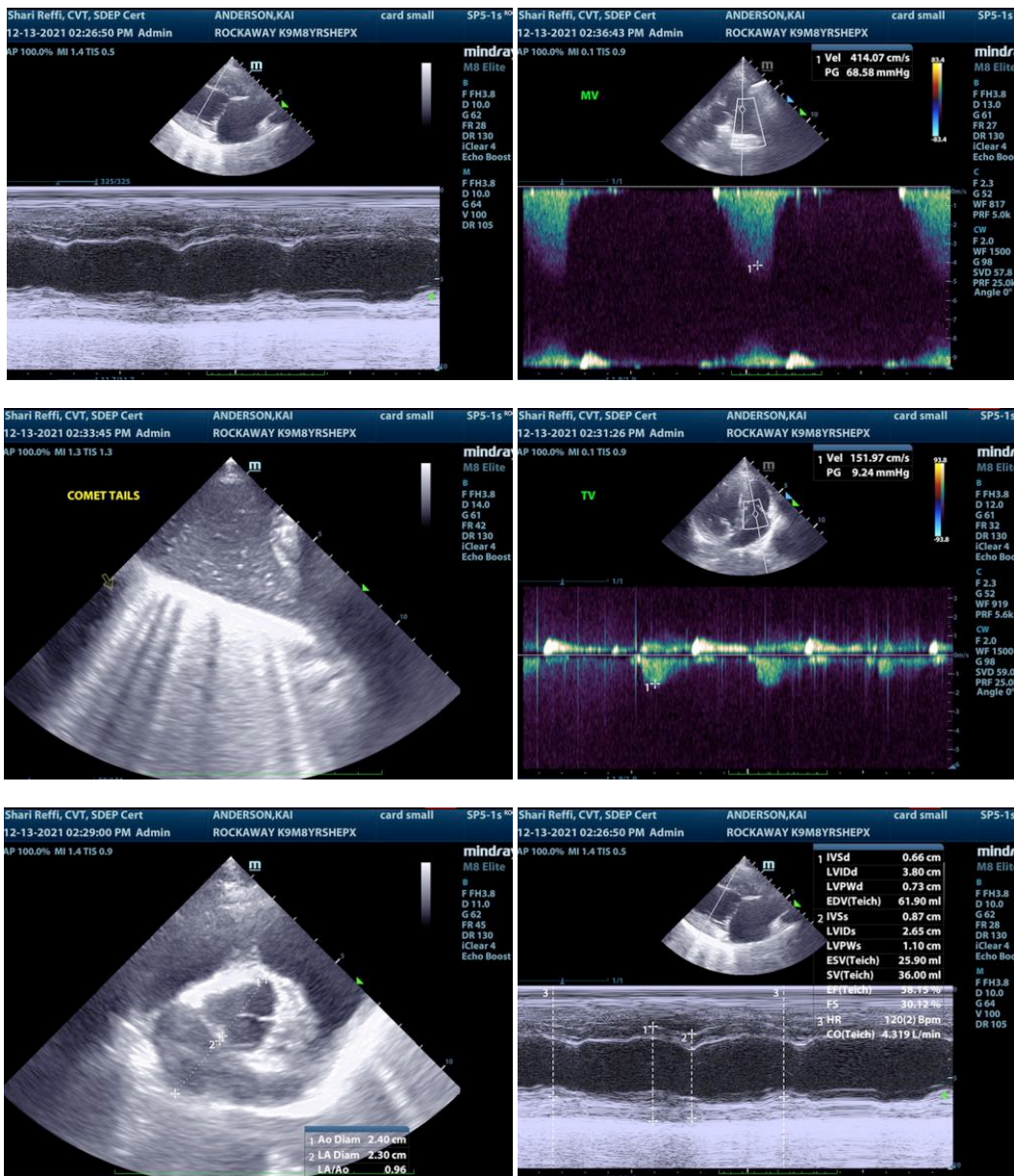
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Hypocontractility is likely owing to sedation as well as the subnormal left ventricular outflow velocity. Chest radiographs are warranted. A chest CT would be ideal. An abdominal sonogram is recommended to assess for primary disease. There is no evidence of clinical cardiac disease at this time. Blood pressure measurements are warranted given the aortic insufficiency.





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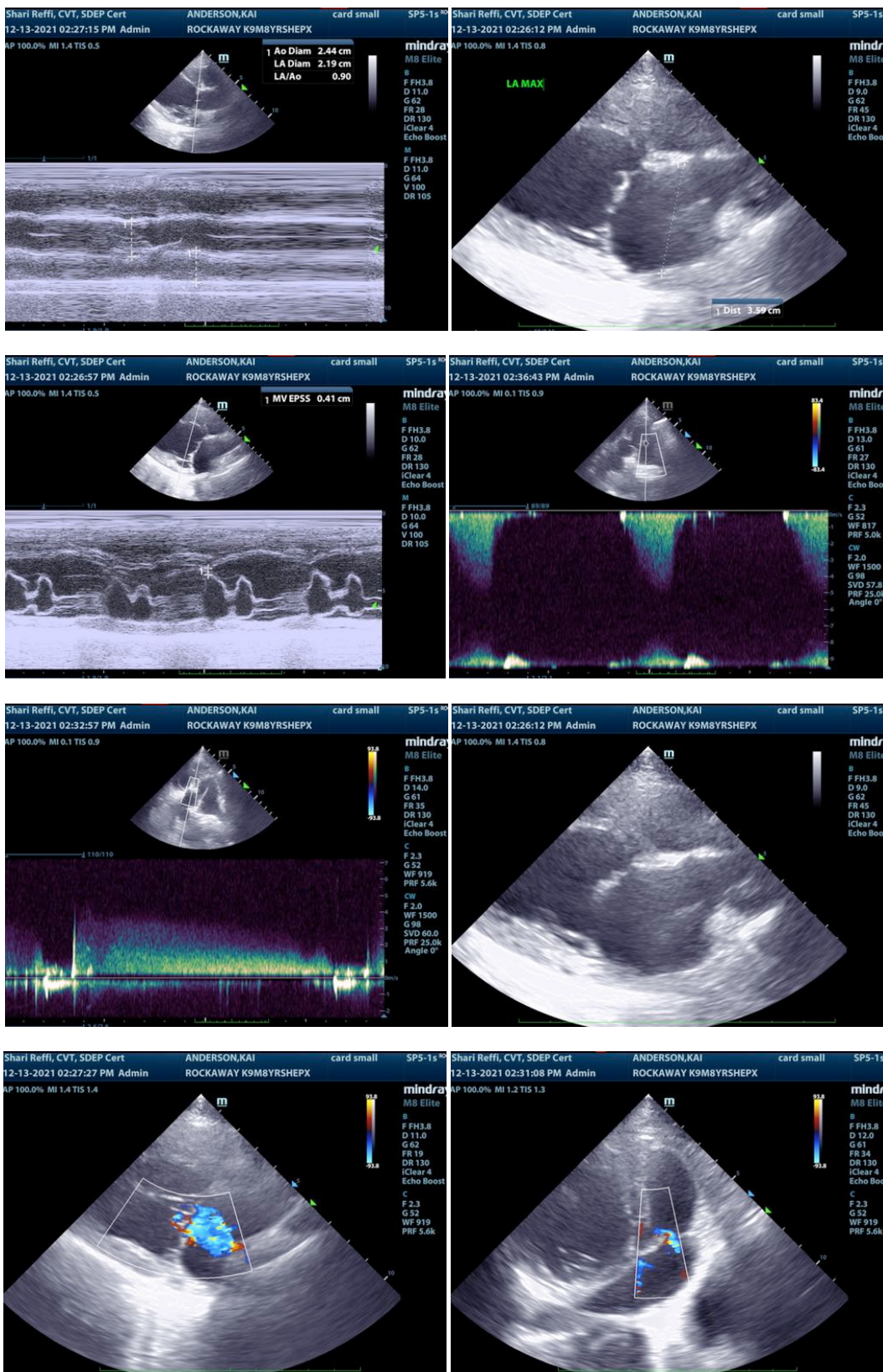
Dr. Ascot

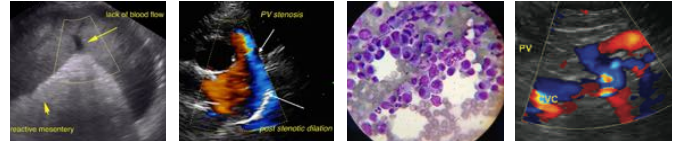
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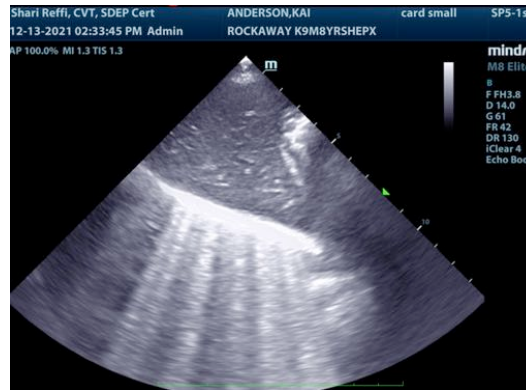
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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  
Info@SonoPath.com