

PATIENT

Kaia Even

PRESENTING CLINICAL SIGNS

History: Prev veterinarian diagnosed with enlarged heart and 3/6 murmur. We did not hear murmur on recent exam Dog is not clinical for heart disease

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

BREED	CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
Border Collie								
SEX	NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
Spayed Female	PATIENT	--	--	1.01	1.3	44	75	0.1
AGE	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)
2 Years	NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6				
WEIGHT	PATIENT	128	1.90-2.00	1.49	--	3.4	3.84	--

55.8 Lbs.

Cardiac Presentation

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 thicknesses with linear contour and was not dilated nor restricted. 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. **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.

INTERPRETED BY

Eric Lindquist, DMV, DABVP, Cert. IVUS

HOSPITAL NAME

Countryside VS

REFERRING VET

Acacia Cordes

INVOICE NUMBER

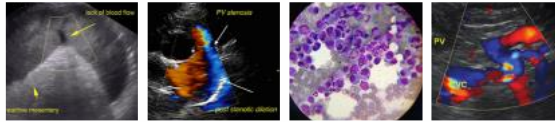
13091

ULTRASONOGRAPHIC FINDINGS

- Normal echocardiogram

DATE

12-17-21



PATIENT

- The left ventricular outflow velocity is upper limits of normal

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Suspect idiopathic flow turbulence during growth phase in this patient, yet self resolved. It's possible in a growth phase, that the increased idiopathic LVOT velocity may occur, especially during excitement. However, structurally, the heart is currently normal with no evidence of congenital disease or aquired disease. All valvular structures and outflow velocities were normal in this patient at this time and were fully interrogated.

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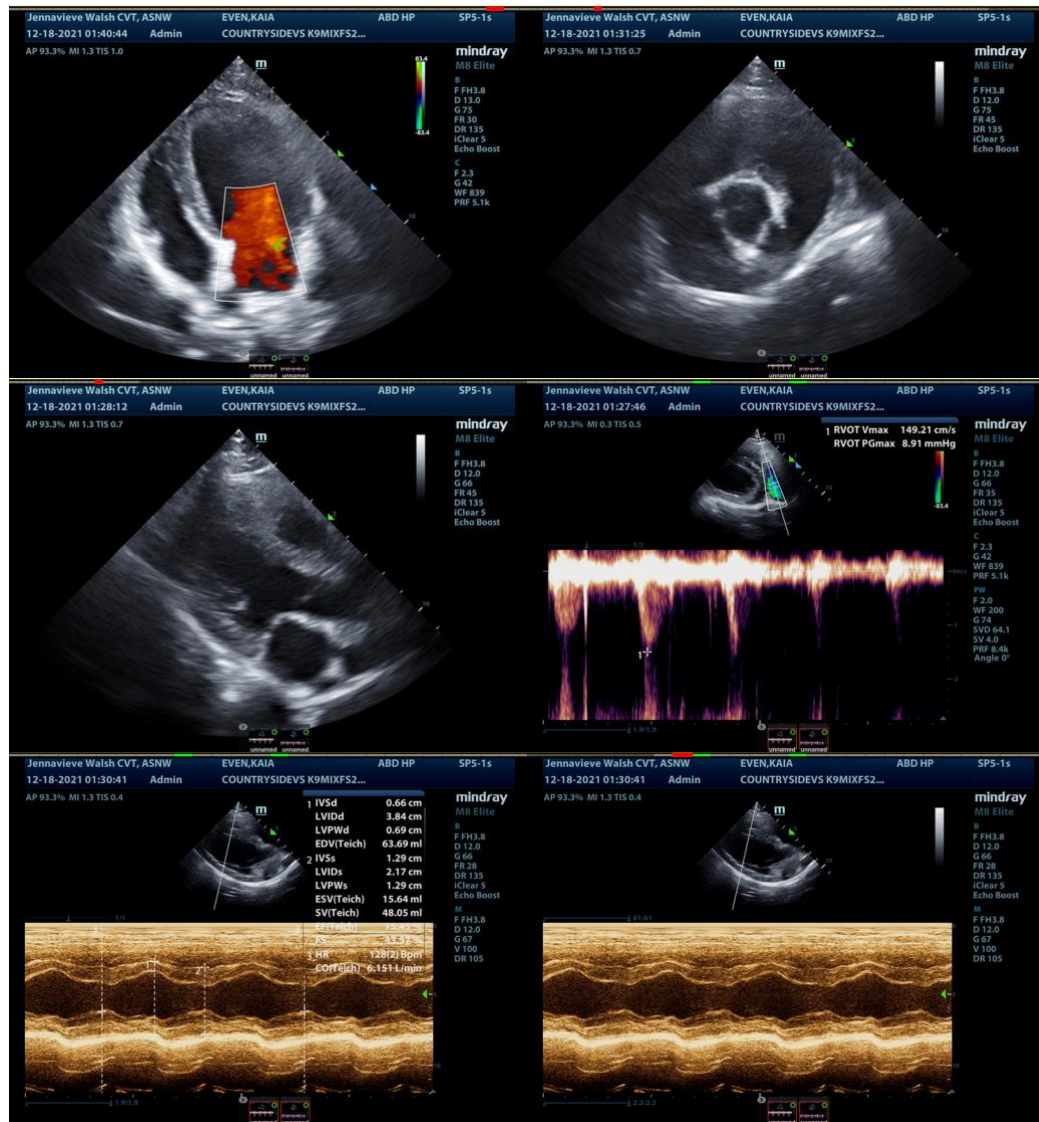
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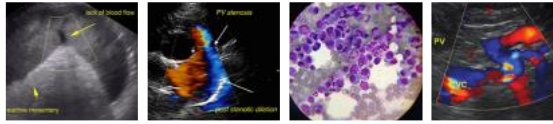
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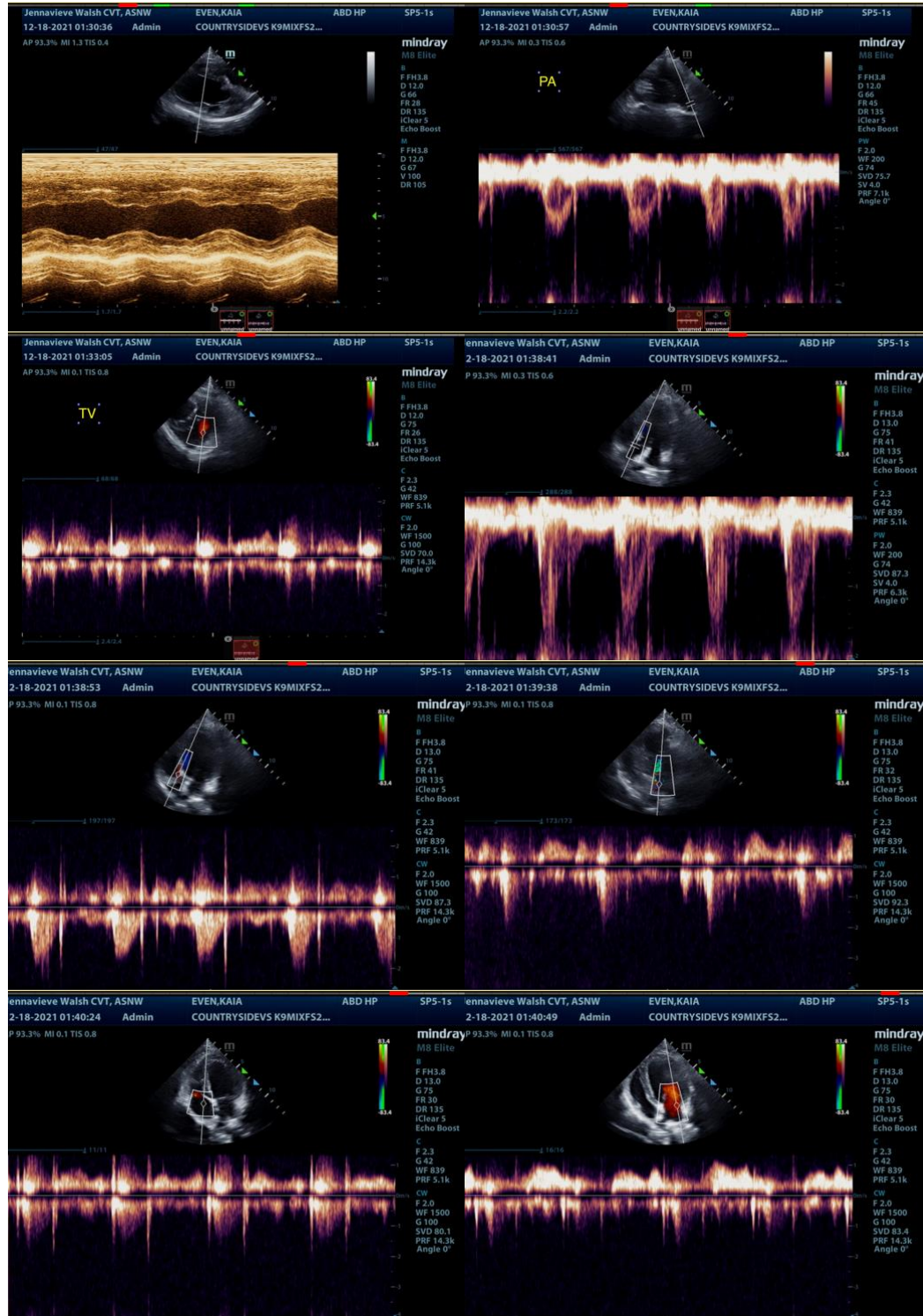
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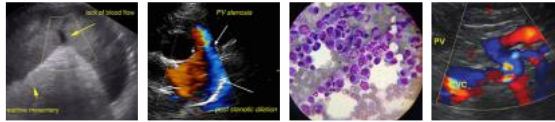
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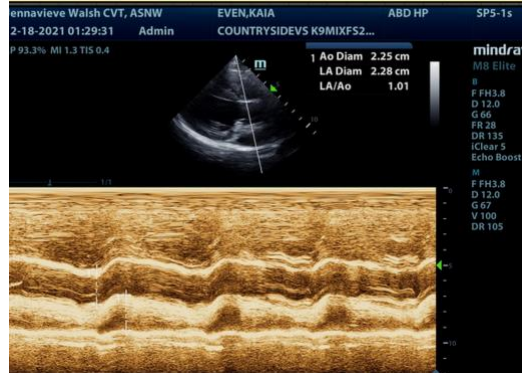
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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 Eric.Lindquist@SonoPath.com