

PATIENT

Tess Kirlin

SPECIES

Canine

BREED

Golden Retriever

SEX

Female

AGE

3 Years

WEIGHT

69 Lbs.

PRESENTING CLINICAL SIGNS

History: Grade I-II systolic cardiac murmur PMI LB ausculted during last physical exam. P is asymptomatic. Registered breeding dog that has gone through extensive pre-breeding screening. P had a litter of puppies in 2020. O is planning OVH and would like to screen for potential anesthesia concerns

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	<1.6	28-40	40-100	<0.6
PATIENT	--	--	1.15	1.0	33	63	0.13
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	111	2.1	1.30	--	3.9	3.55	--

Cardiac Presentation

INTERPRETED BY

Eric Lindquist, DMV, DABVP, Cert. IVUS

HOSPITAL NAME

South Willamette VC

REFERRING VET

Dr. Willaman

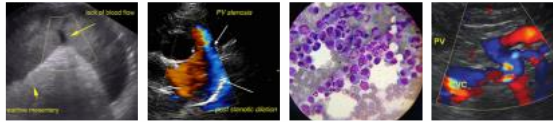
INVOICE NUMBER

13092

DATE

12/17/21

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate methods of LA evaluation. Trivial mitral insufficiency noted with a minor centralized jet noted, not clinically significant. Periodic doppler assessment of the left ventricular outflow tract revealed slight excessive velocity. However, this was not persistent, and this may be the source of the murmur, especially if the murmur is ejection murmur. This is an idiopathic finding. No evidence of congenital disease. 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.



PATIENT ULTRASONOGRAPHIC FINDINGS

Tess Kirlin • Minor idiopathic increased LVOT velocity, slightly out of normal range and not clinically significant

SPECIES • Trivial mitral insufficiency, not clinically significant.

Canine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

BREED No evidence of congenital disease. No contraindication to anesthetic procedure.

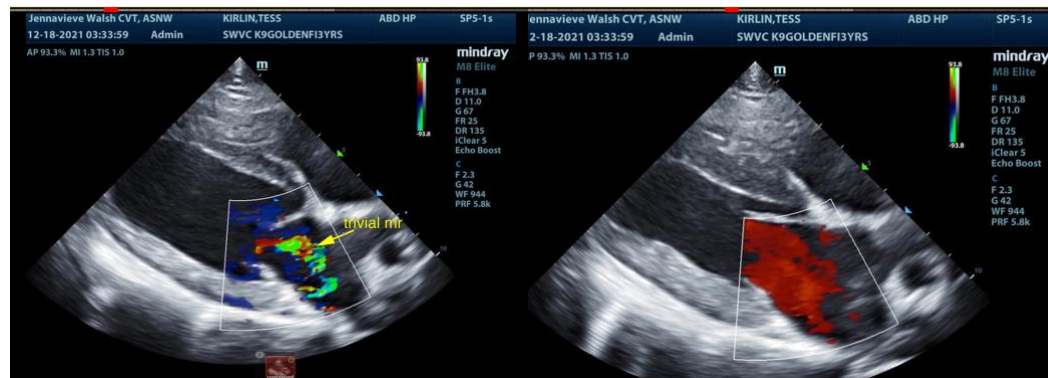
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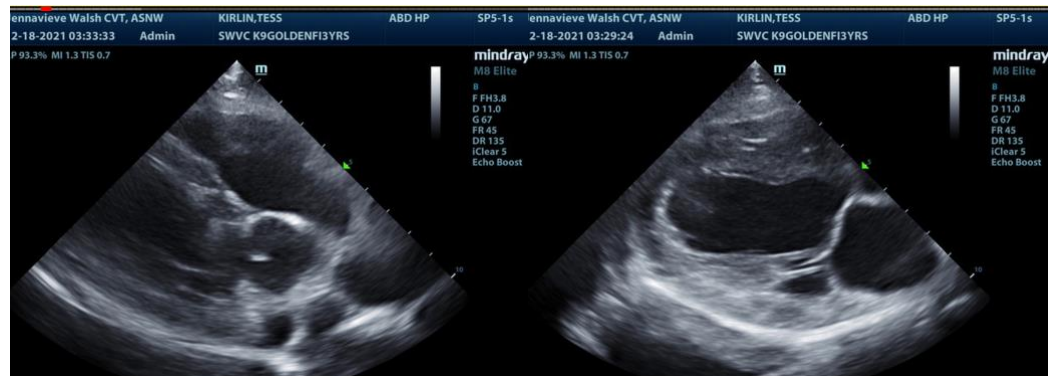


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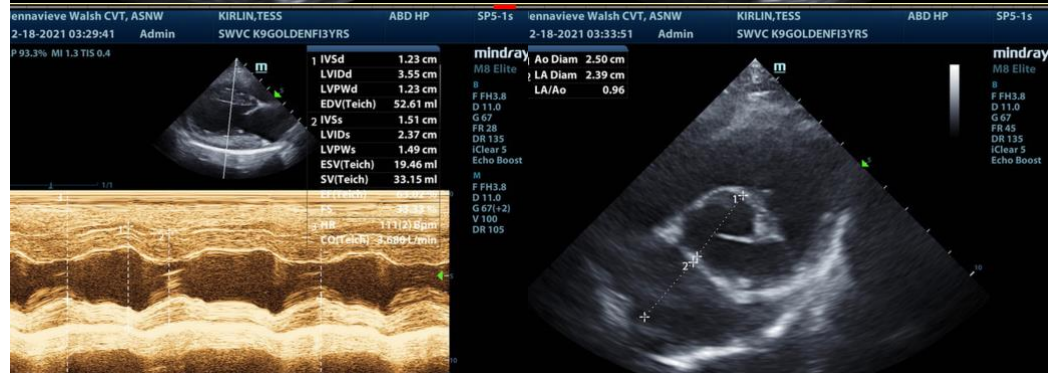
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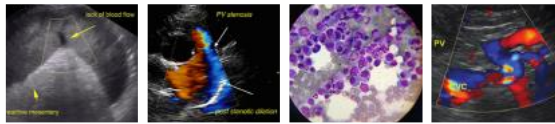
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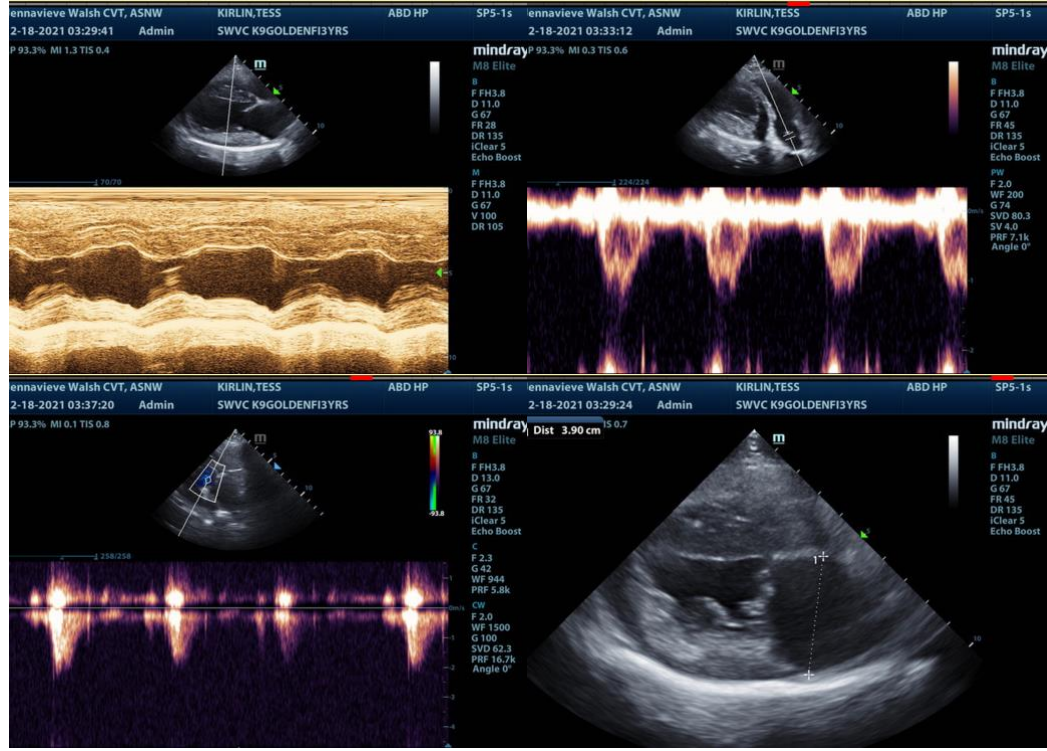
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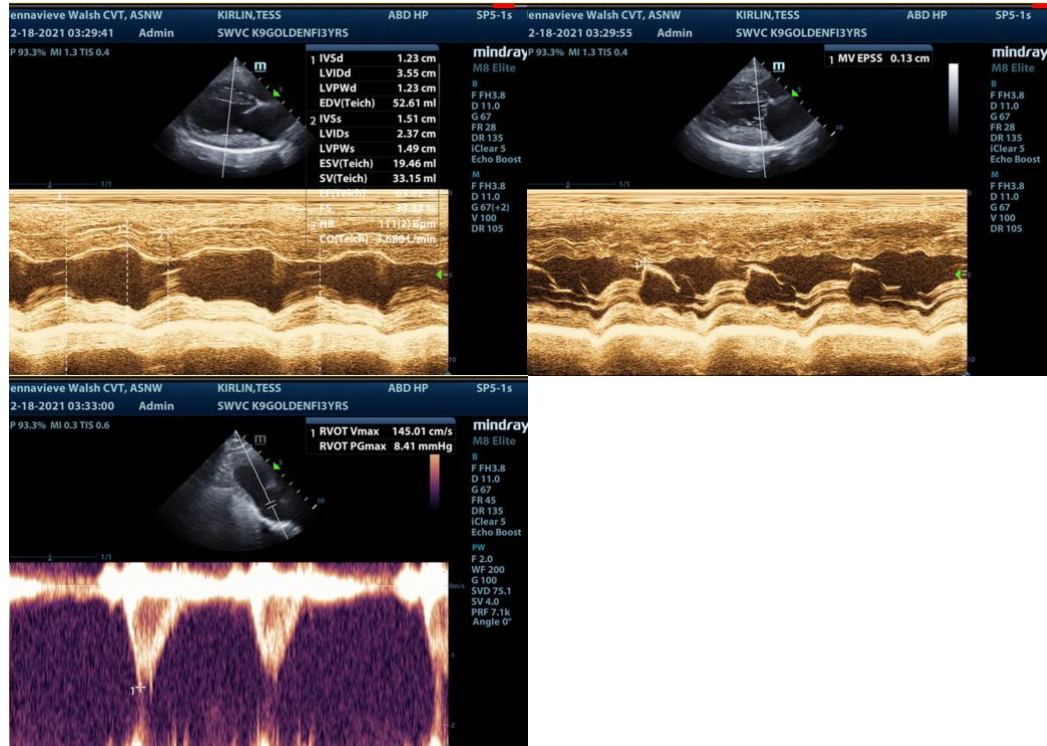
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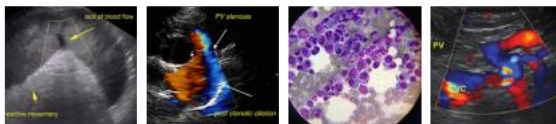
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The information and recommendations provided are based on the images presented by



PATIENT the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Tess Kirlin

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

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