


PATIENT

Cida Shikany

SPECIES

Canine

BREED

Shepherd X

SEX

Spayed Female

AGE

11 Years 11 Months

WEIGHT

61.4 Pounds

INTERPRETED BY

 Eric Lindquist, DMV
 DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Sarah Green

HOSPITAL NAME

Healing Spirit

REFERRING VET

Dr. Sarah Green

INVOICE

33262

DATE

12/5/21

PRESENTING CLINICAL SIGNS

History of CHF since 7/20. Atrial fibrillation since 8/2021. Presented 12/1/21 due to ascites. Currently on Furosemide 31.25 mg (~ 1.5mg/kg) BID, Pimobendan 7.5 mg TID, Diltiazem 30 mg PO TID, Spironolactone 50 mg BID added yesterday.

Abnormal PE/Chem/CBC/UA Results: CBC: lymphocytes=950 (1000-4800) /uL CHEMISTRY: ALT=164 (10-118) u/L, BUN=67 (7-25) mg/dL, P=6.6 (2.9-6.6) mg/dL, Cr=3.5 (0.3-1.4) mg/dL, TP=5.3 (5.4-8.2) g/dL, globulin=1.9 (2.3-5.2) g/dL T4=3.4 (1.1-4.0) ug/dL

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			1.6	1.9	45		0.4
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		--	1.0			5.0	

Cardiac Presentation

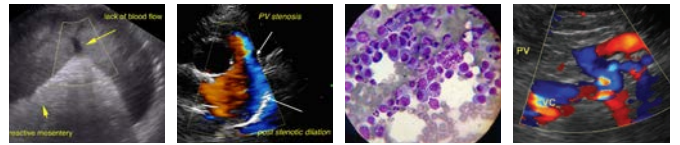
Mitral insufficiency noted on pulse wave and color flow doppler with significant arrhythmogenic activity. Moderate amount of pericardial effusion noted. Hepatic vein dilation present, likely owing to right-sided failure. Pulmonic insufficiency was present. Severe left atrial and left ventricular dilation noted. Prolapse of the anterior mitral valve leaflet noted. The right atrium was mildly enlarged. The right ventricle was unremarkable. No masses noted in the pericardial space, yet cannot be completely ruled out. Regarding the pericardial effusion in light of left atrial enlargement, I'm concerned for left atrial tear or occult neoplasia.

ULTRASONOGRAPHIC FINDINGS

- Left- and right-sided heart failure with arrhythmogenic activity and pericardial effusion owing to left atrial tear or possible occult neoplasia.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the volume overload in the left heart, I would have to presume that a left atrial tear is likely. Prognosis is poor long-term. The patient is at risk for sudden death. Sildenafil could be added at 1mg/kg BID as well as potential increase in Furosemide if necessary. However, prognosis is poor.



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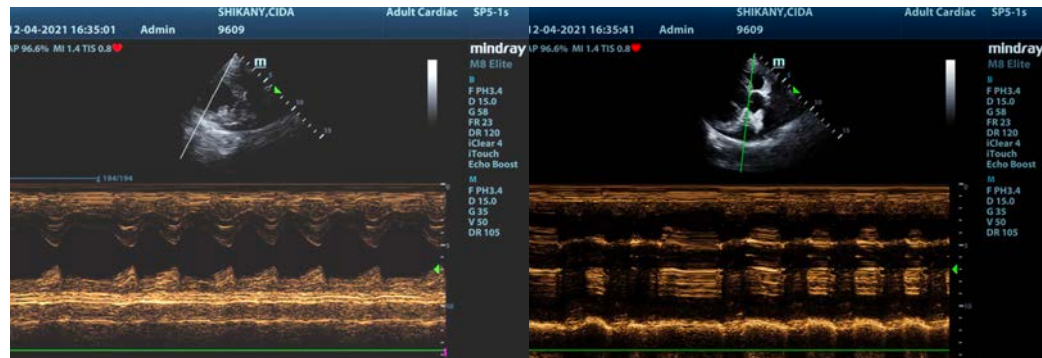
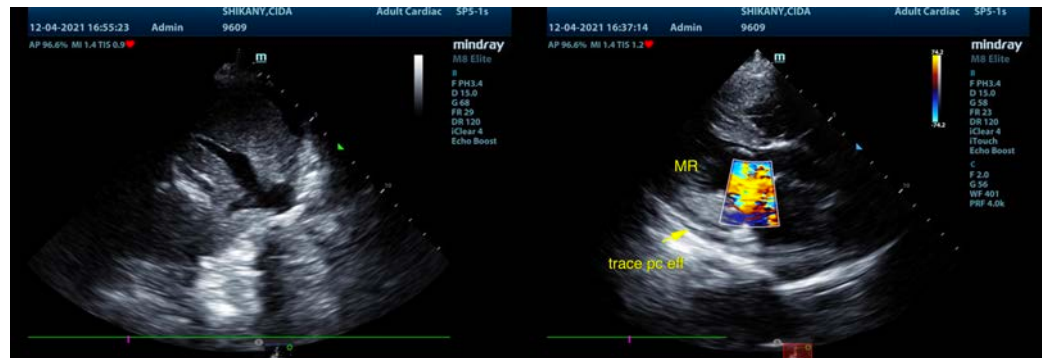
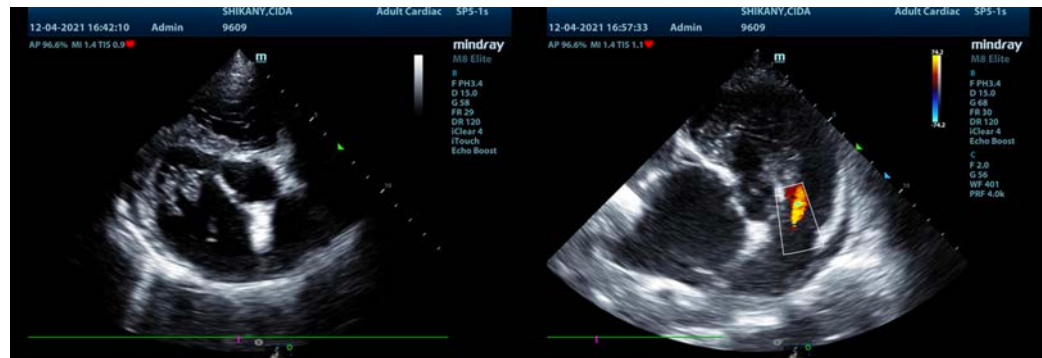
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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