

PATIENT

Petey Conn

SPECIES

Canine

BREED

Miniature Pinscher

SEX

Neutered male

AGE

8 years

WEIGHT

18.5 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. McFeely

HOSPITAL NAME

Straley VA

REFERRING VET

Dr. McFeely

INVOICE

42968

DATE

2/24/23

PRESENTING CLINICAL SIGNS

History: Petey presented for a wellness exam in Oct. 2022 (4 months ago) and his owner mentioned he had a cough that occurred in the morning or after drinking. It did not improve with loratadine therapy per owner. We discussed environmental changes, weight loss was recommended, and Petey was to be scheduled for thoracic radiographs and blood work. Mrs. Conn brought in Petey for a cardiac diagnostic work-up today, to include chest radiographs, blood pressure measurement and cardiac ultrasound. Petey was given 1.7mg butorphanol IV to lightly sedate for his procedures. After his ultrasound was performed, his blood pressure was determined to be normal at 149/108 (125) mmHg systolic/ diastolic (MAP). On his survey chest radiographs, his VHS was observed to be 11, and his cardiac silhouette, great vessels and organs in visible field were normal, and he had a mild bronchiolar pattern. He only coughed initially today with tracheal pressure while in the hospital when pulling against his E-collar.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

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.

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT			NM	1.2	45		0.1
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT	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	BELOW	BELOW	BELOW	BELOW
PATIENT		1.3	0.9	18.5 lbs		2.8	



PATIENT **ULTRASONOGRAPHIC FINDINGS**

Petey Conn Normal echocardiogram.

SPECIES **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Canine There was no evidence of pathology. The cough is non-cardiogenic. No therapy is recommended.

BREED

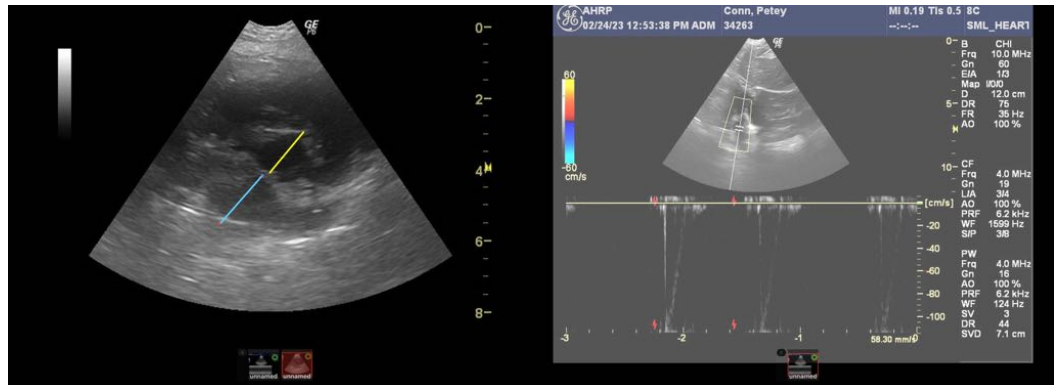
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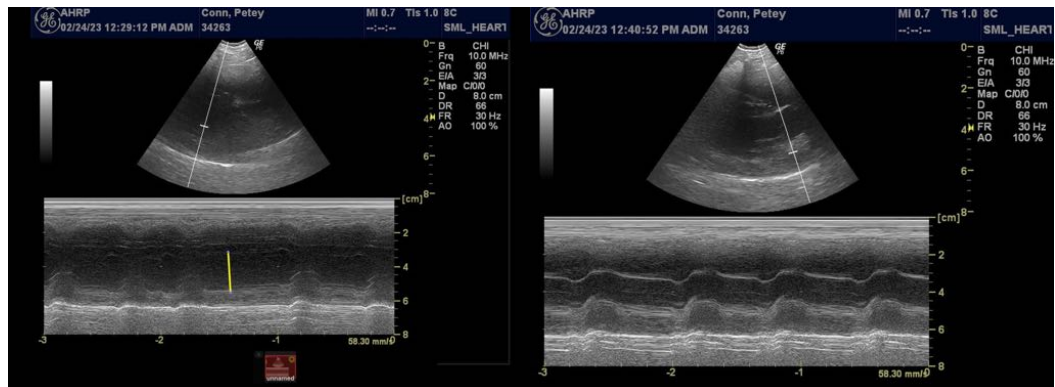


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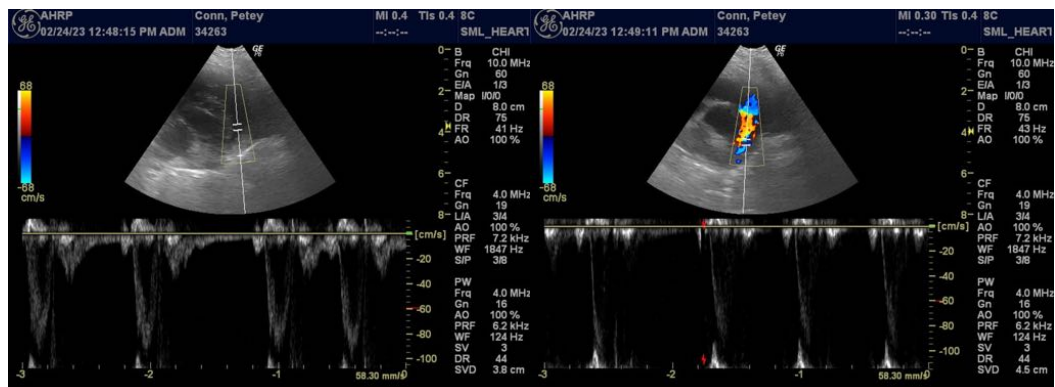
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



PATIENT

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.

Petey Conn

SPECIES

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com

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