



**PATIENT**

Ziggy Brandle

**SPECIES**

Canine

**BREED**

Boxer

**SEX**

Male

**AGE**

9 Years 9 months

**WEIGHT**

57 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV,  
 DABVP (Canine &  
 Feline), Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Ken Leal

**HOSPITAL NAME**

VCA AVH

**REFERRING VET**

Dr. Elizabeth Dymond-  
 Szabo

**INVOICE**

36182

**DATE**

3/10/26

**PRESENTING CLINICAL SIGNS**

- Clearance for anesthesia for mass removal (MCT) +/- dentistry
- Grade 2/6 left systolic murmur
- 6/18/18 = mild sub aortic stenosis
- Medications: Gabapentin, trazodone, topicals for corneal ulcer (Optic Care Plus), Ofloxacin oath drops, CADI pro
- Abnormal PE/Chem/CBC/UA Results: Albumin = 2.7, Globulins = 3.9 UA: prot = 2+, pH = 7.0, WBC = 4-10, RBC = 2-3 , squamous 4 - 10 SpGravity = 1.021z

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (M-Mode)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	Up to 1.6	28-40	40-100	<0.6
PATIENT	--	--	1.0	1.4	37	68	NM
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (lbs)	LAD LA MAX 4 Chamber	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	155	2.08	1.92	57 lbs	4.3	3.3	--

**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. Aortic velocity was mildly elevated. 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



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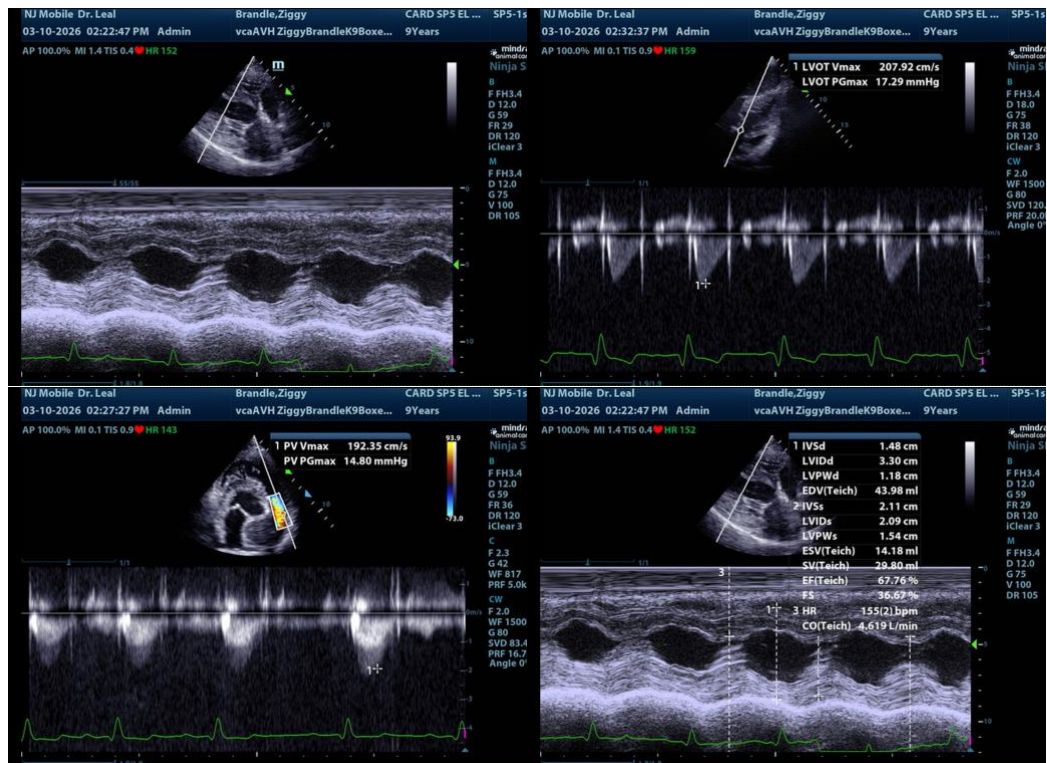
structure, laminar flow, and diameter (approx.1:1 pa/ao ratio). No visible **pericardial** or free pleura fluid was noted. The cranial **mediastinum** and **pericardial** and **extra-cardiac** regions were free of masses in the visible window.

**ULTRASONOGRAPHIC FINDINGS**

- Idiopathic increased LVOT velocity, typical for the breed

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Blood pressure measurements are warranted. As long as systolic pressures are <160, no contraindications to anesthetic procedure. No specific protocol is necessary.



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.

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(CFM), Cert. IVUSS,**  
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