


**PATIENT**

Pepper Nash

**SPECIES**

Canine

**BREED**

Lab X

**SEX**

Spayed Female

**AGE**

3 Years

**WEIGHT**

21 kg

**PRESENTING CLINICAL SIGNS**

Presented following collapse while hiking. No prior history of health issues. Diet is Kasik Grain Free  
 Abnormal PE/Chem/CBC/UA Results: Generally healthy appearing young dog in excellent coat and body condition, Ambulatory, but weak, pale on admit BP is normal Labs: (mini/ ER panel) -Elev ALT 332 - PCV/TP, gluc, BUN, lytes normal

**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		3.0	1.71	2.74	15	31	1.72
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	BELOW	BELOW	BELOW	BELOW
PATIENT	120	1.27	2.54		5.7	6.69	

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Callihan

**HOSPITAL NAME**

Animal Emergency Care

**REFERRING VET**

Dr. Johnson

**INVOICE**

36132

**DATE**

3/13/22

**Cardiac Presentation**

The cardiac presentation in this patient present four chamber overdilatation with severe hypocontractility. No pericardial or pleural effusion noted. However, mitral and tricuspid insufficiency is present. Septal and free wall thinning were noted. Both left and right atrial enlargement were present. Tricuspid insufficiency noted, consistent with early pulmonary hypertension. Pulmonic insufficiency also present.

**ULTRASONOGRAPHIC FINDINGS**

- Dilated cardiomyopathy presentation. Myocarditis and nutritional cardiomyopathy are also potentials.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Recommend quadrotherapy in this patient with Lasix at 3-4 mg/kg BID, Spironolactone at 1-2 mg/kg BID, ACE inhibitor 0.5 mg/kg SID progressing to BID, and Pimobendan at 0.3 mg/kg BID. Serum Taurine levels and supplementation recommended. Assessment for regional infectious agents for causes of myocarditis such as lyme or other should be considered. Given the grain-free diet history, diet change would be appropriate. Recheck echo in 7-10- days. Prognosis is guarded depending upon response to therapy and if a nutritional aspect is present or not.



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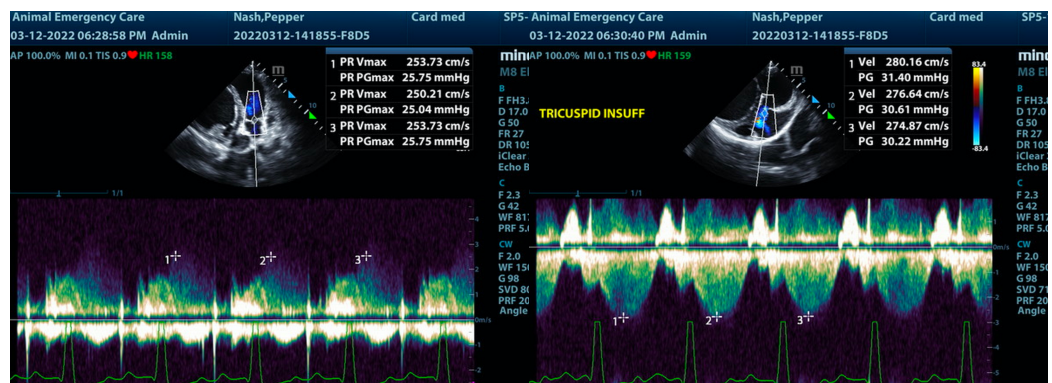
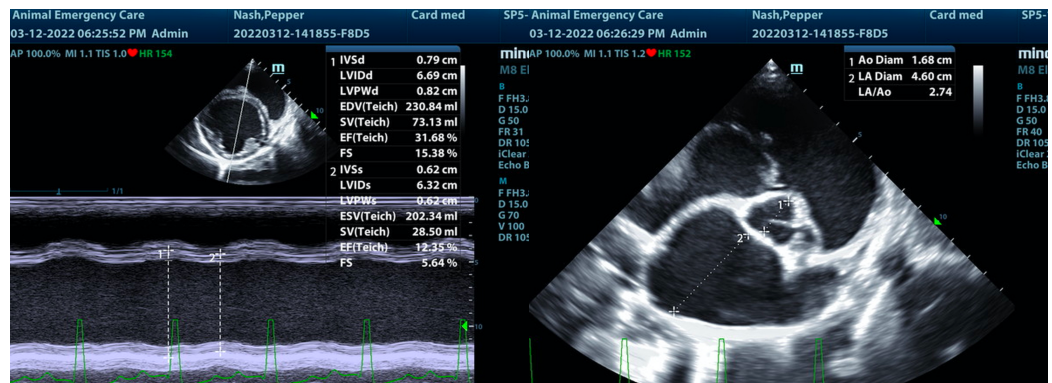
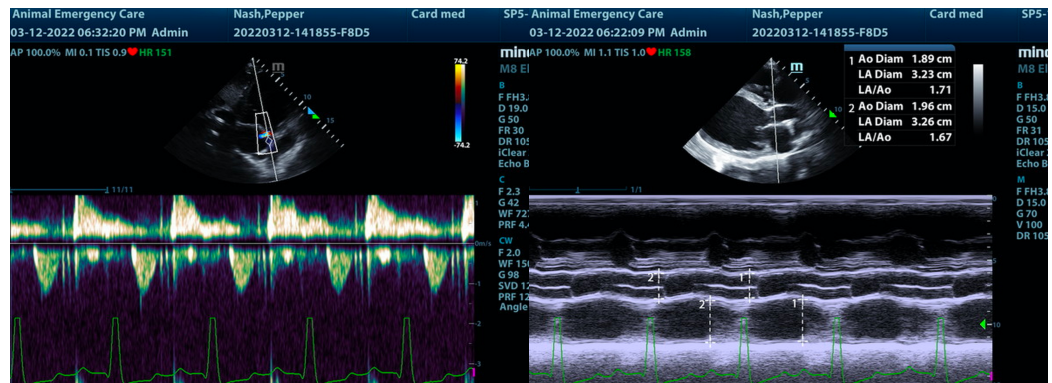
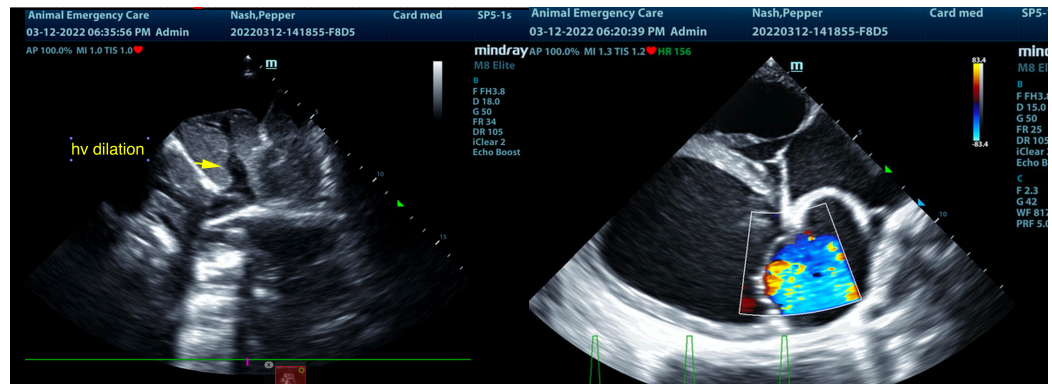
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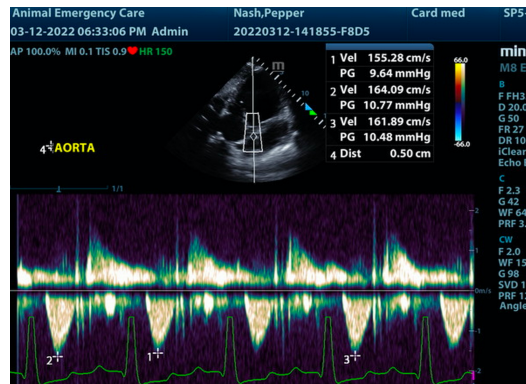
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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