



PATIENT

Fluff Faust

SPECIES

Canine

BREED

Maltese

SEX

Male

AGE

13 Years 2 Months

WEIGHT

26 pounds

INTERPRETED BY

Eric Lindquist, DMV,
DABVP(CFM), Cert.
IVUSS

IMAGING PERFORMED BY

Shari Reffi CVT

HOSPITAL NAME

William Penn
Veterinary Hospital

REFERRING VET

Dr. Bouzaout

INVOICE

14466

DATE

03/19/26

PRESENTING CLINICAL SIGNS

- BCS 5.9
- Grade V/VI heart murmur
- Coughing, cardiomegaly
- Current Meds: Furosemide 20mg bid; Pimobendan 3.75mg; Thyro tabs 0.2mg; Theophylline 400mg; Hydrocodone

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	5.9	3.49	1.6	1.6	46	78	0.1
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	--	1.32	0.9	26.0	4.05	3.12	--

E-wave velocity: 1.0

Cardiac Presentation

The cardiac presentation in this patient presented with mild persistent volume overload of the left atrium and left ventricle. Mitral and tricuspid insufficiency was present. Mild atrial septal deviation was noted owing to mild left atrial enlargement. Contractility appeared adequate. Mitral valve insufficiency was moderate to severe with slight prolapse of the anterior mitral valve leaflet. Pericardial and pleural spaces were unremarkable.

ULTRASONOGRAPHIC FINDINGS

- Largely compensated valvular disease under current protocol.
- Mild volume overload of the left atrium and left ventricle.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommend adding to the current protocol ACEi at 1.5 mg/kg SID progressing to BID and Spironolactone at 1.0 to 2.0 mg/kg SID. After this has been implemented, then Furosemide can likely be reduced to half the current dose. Monitoring of BUN, creatinine and blood pressures are recommended with recheck echo in six months, earlier if clinical signs initiate.



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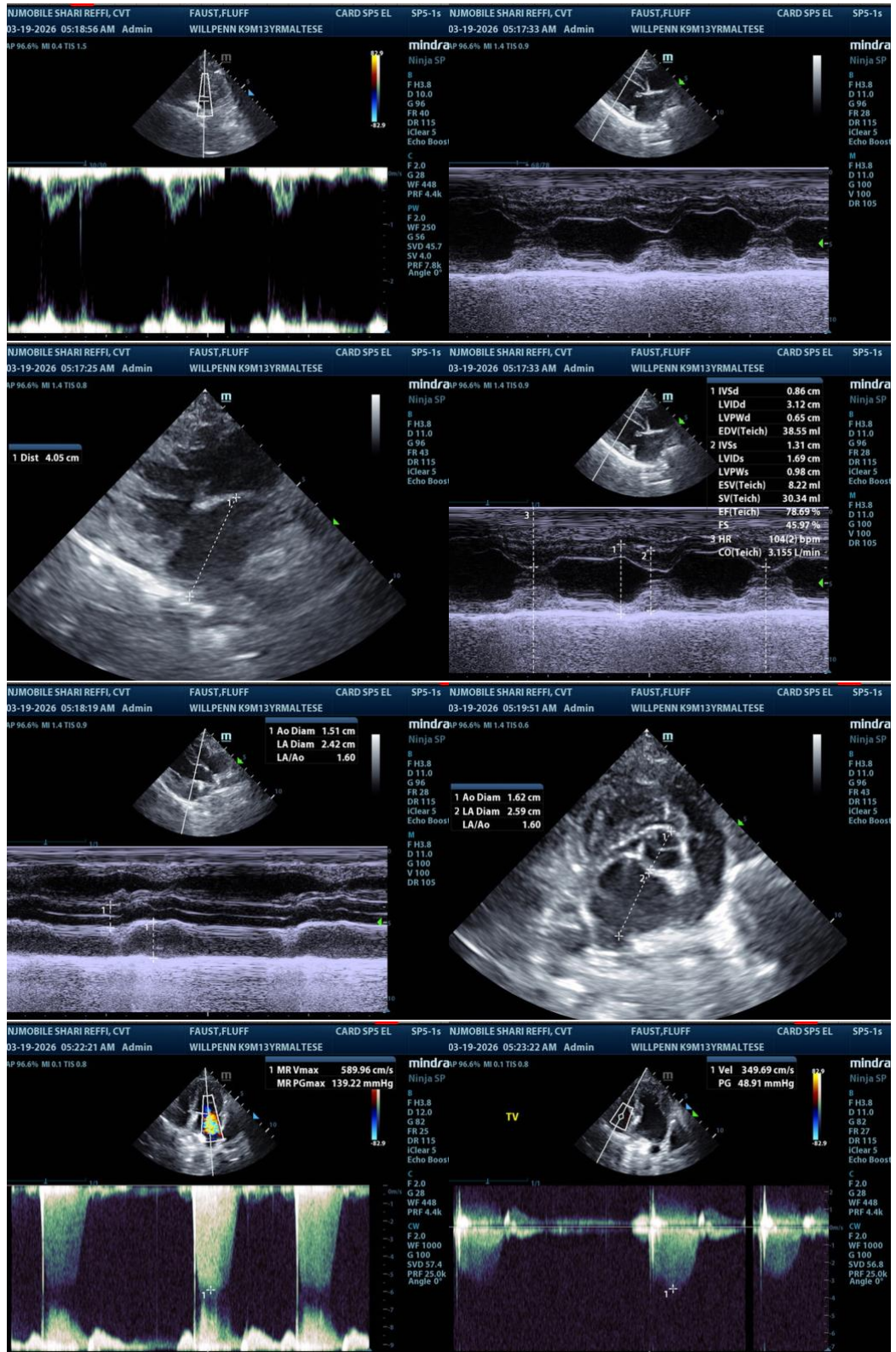
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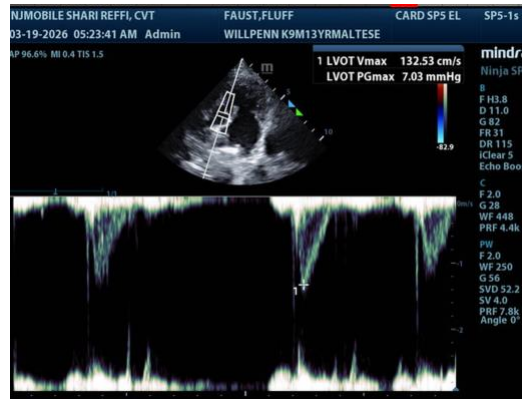
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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(CFM), Cert. IVUSS,

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