



PATIENT PRESENTING CLINICAL SIGNS

Mojo Daviz History: Evaluate heart murmur and medications needed, if any. Grade IV/VI systolic murmur.
 Current meds: Lasix 12.5mg 1 tab BID, Orbox 22.5mg 1 Tab SID x 14, Theophylline 100mg BID
 Abnormal PE/Chem/CBC/UA Results: WBC 17000, neut 11484, Eos 1914, DGPT 153, Ca 8.8, K 5.6, SDMA 15.1 HW 4DX = Neg

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

BREED

Chihuahua

SEX

Neutered male

AGE

16 years

WEIGHT

13.4 lbs

The echocardiogram in this patient demonstrated upper limits of normal **left atrial** size based on 3 different LA measurement methods. Chamber volumes and echogenicity were normal. The cranial and caudal **mitral** valve leaflets presented vegetative thickening consistent with endocardiosis. Doppler indicated measurable insufficiency. 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** was enlarged. Prolapse of the anterior **tricuspid** leaflet was noted. The **right ventricle** was enlarged. **Pulmonic** 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. No echographically detectable evidence of infiltrative disease was visible. The cranial **mediastinum** and **pericardial** regions were free of masses in the visible window.

INTERPRETED BY

Eric Lindquist, DMV
 DABVP, Cert. IVUSS

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	5.61	3.67	1.47		47	80	NM
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				
PATIENT	159	1.5	1.11	13.4 lbs	2.7	2.8	

**IMAGING
PERFORMED BY**

Jessica Miller, RDMS

HOSPITAL NAME

Byram AH

REFERRING VET

Dr. Cruz

ULTRASONOGRAPHIC FINDINGS

Mitral and tricuspid insufficiency with mild left and right atrial enlargement.

INVOICE

97075

Moderate pulmonary hypertension.

Early B2 valvular disease.

DATE

3/22/22



PATIENT

Mojo Daviz

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend initiating Pimobendan at 0.3 mg/kg b.i.d. Ace inhibitor is warranted if the systolic pressure is > 160. If any exercise intolerance is present then Sildenafil can also be considered at 1 mg/kg b.i.d.

SPECIES

Canine

The heart has some volume overload and is working to compensate for the valvular insufficiency. Target respiratory rate is < 20 resp/minute after therapy. After initiating therapy, I recommend recheck on the clinical exam, BUN, Creatinine, USG, Chest radiographs & Blood pressure in 5-7 days. Recheck echo in 1 month. Earlier if clinical decompensation is occurring. I do not recommend anesthesia at this time until stabilization has occurred on the recommended medications. Repeat preanesthetic echo is ideal if anesthesia is eventually necessary

BREED

Chihuahua

SEX

Neutered male

AGE

16 years

WEIGHT

13.4 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jessica Miller, RDMS

HOSPITAL NAME

Byram AH

REFERRING VET

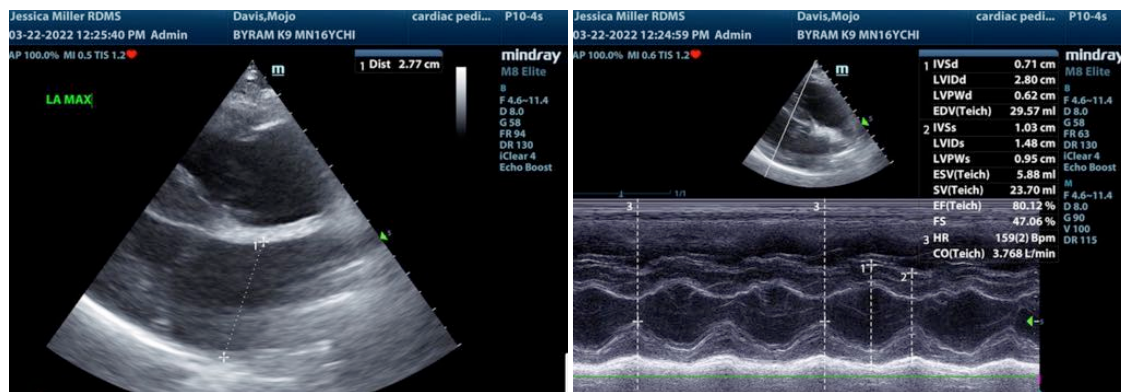
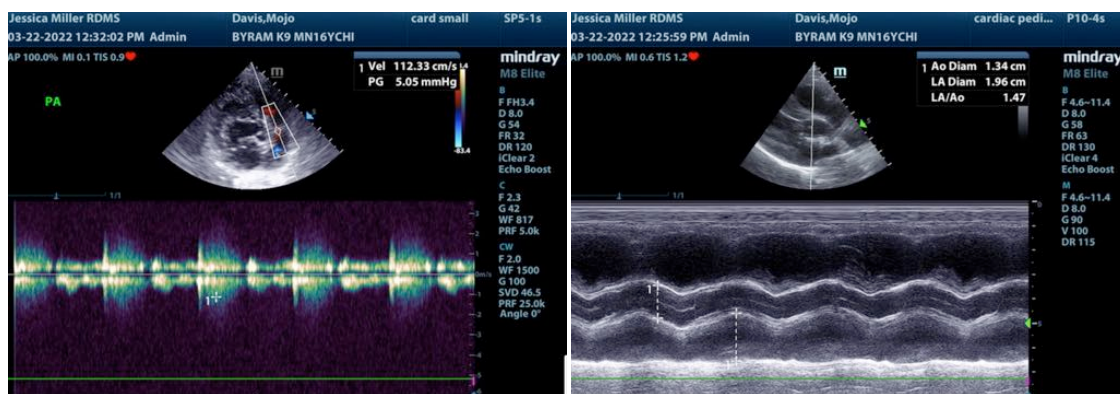
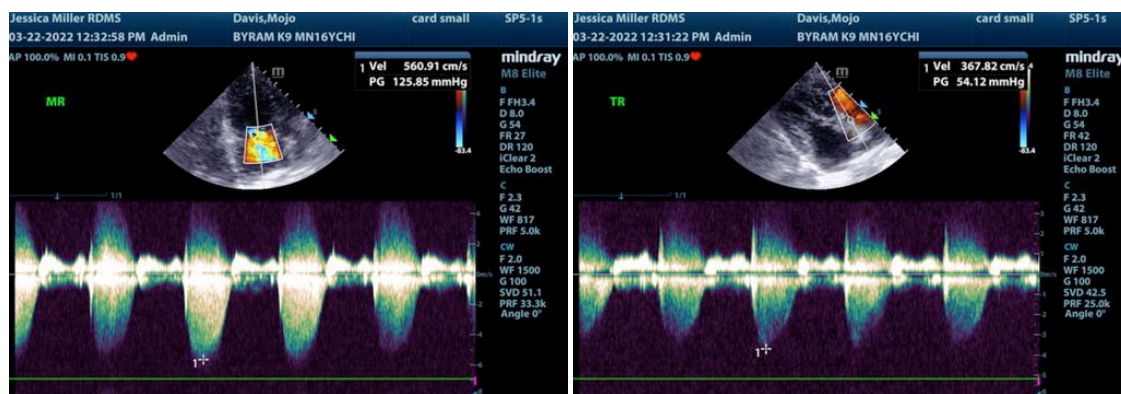
Dr. Cruz

INVOICE

97075

DATE

3/22/22





PATIENT

Mojo Daviz

SPECIES

Canine

BREED

Chihuahua

SEX

Neutered male

AGE

16 years

WEIGHT

13.4 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jessica Miller, RDMS

HOSPITAL NAME

Byram AH

REFERRING VET

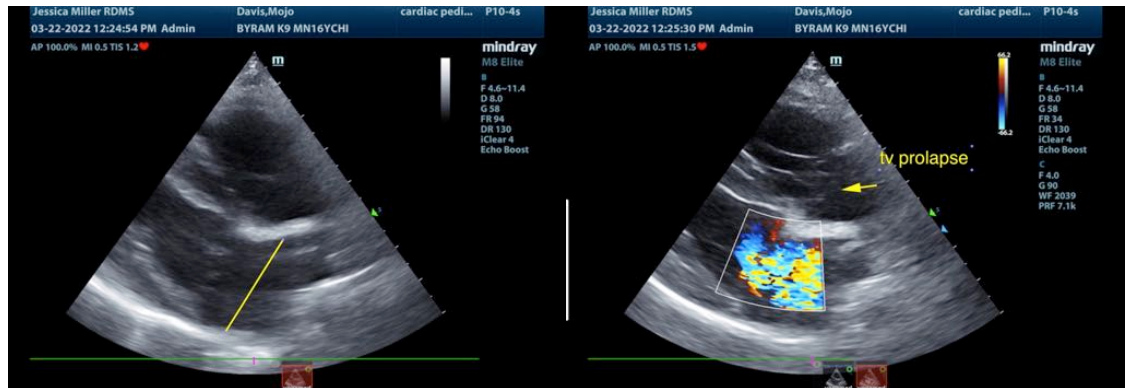
Dr. Cruz

INVOICE

97075

DATE

3/22/22



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
info@SonoPath.com