



PATIENT PRESENTING CLINICAL SIGNS

Taj Walker History: Recheck echo (last performed 2 1/2 weeks ago) after starting Pimobendan. Patient is coughing minimally at home. Hopeful to plan for dentistry in the near future.

SPECIES Abnormal PE/Chem/CBC/UA Results: Grade 4/6 left systolic murmur, slight cough on tracheal palpation. Patient is coughing minimally at home.

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

BREED

Chihuahua

SEX

Neutered Male

AGE

8 Years

WEIGHT

3.89 kg

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	<1.3	28-40	40-100	<0.6
PATIENT	5.5	--	1.3	1.9	50	--	0.1
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				
PATIENT	--	1.90	1.10	--	3.6	2.9	--

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jolee Stegemoller,
DVM

HOSPITAL NAME

North Idaho Ah

REFERRING VET

Richard Morgan, DVM

INVOICE

21430

DATE

3/3/23

Cardiac Presentation

The cardiac presentation in this patient presented persistent mitral valve prolapse with improved left atrial size and adequate contractility. The left ventricular internal diameter was contained. The right atrium and right ventricle were unremarkable. Pulmonary and aortic outflows were unremarkable. Mild improvement of the left atrial size was noted.

ULTRASONOGRAPHIC FINDINGS

- Somewhat stable stage B-2 valvular disease
- Mild anesthetic risk in this patient, owing to the mitral valve prolapse and minor volume overload

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given that the persistent coughing is evident, adding Spironolactone 1-2 mg/kg BID and Ace-inhibitor 0.5 mg/kg SID (progressing to BID), could be considered as a trial and reassessment of the cough is recommended. If BUN, creatinine and blood pressures are normal after one week on that protocol, then Torbutrol (premed), Propofol (induction) and Isoflurane (maintenance) with minimal anesthetic time, is recommended, ensuring that Pulse oximetry is >96. Monitoring, ideally EKG and Pulse oximetry in this patient is recommended. I believe that the anesthetic risk would be minor at this point. Recheck echo in 6 months.



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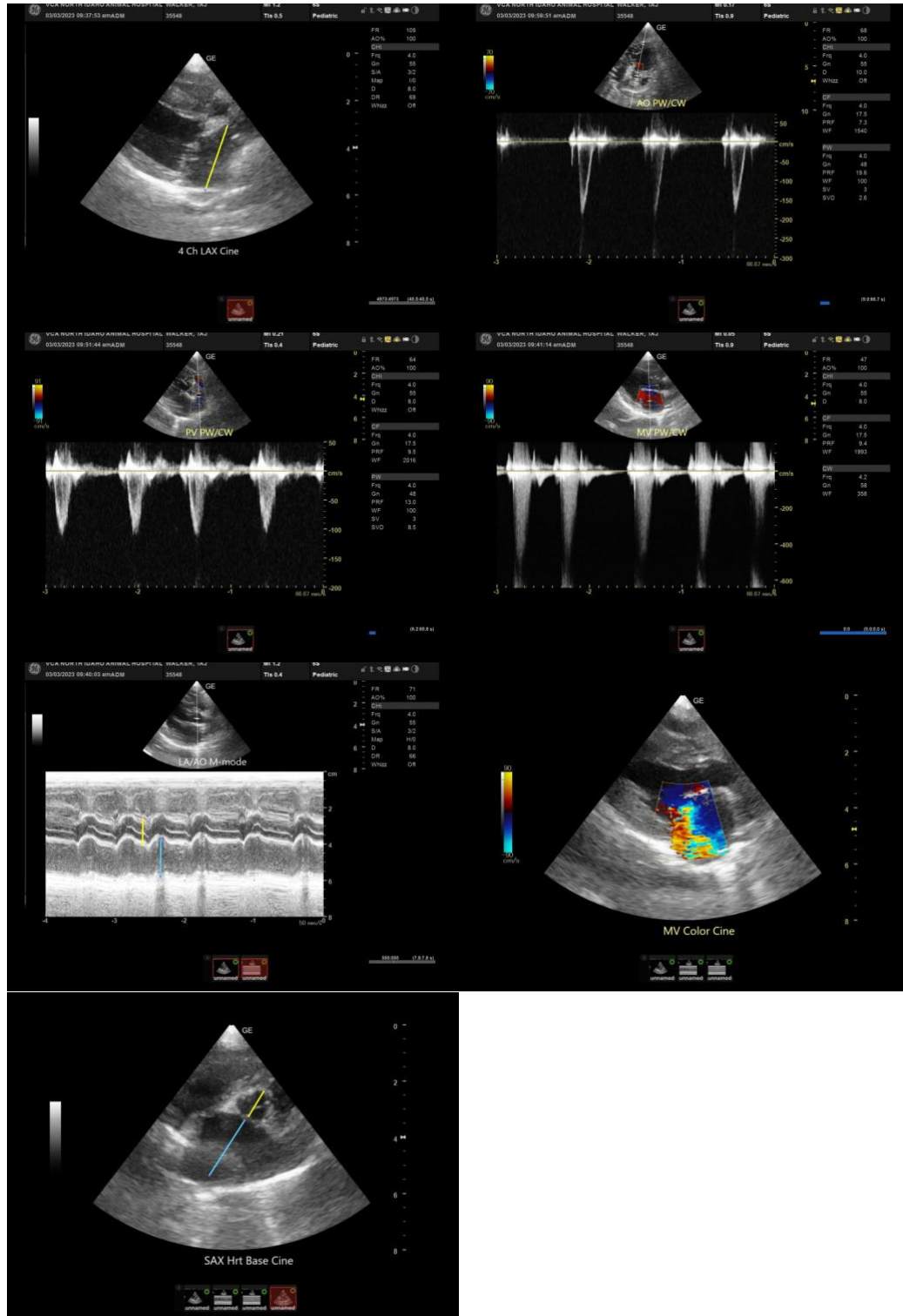
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



PATIENT

Taj Walker

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.

SPECIES

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info@SonoPath.com

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