

## PATIENT

Duggie Caputo

## SPECIES

Canine

## BREED

Terrier Mix

## SEX

Neutered male

## AGE

10 years

## WEIGHT

28.5 lbs

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Dr. Carlos Abdul Chani

## HOSPITAL NAME

Byram AH

## REFERRING VET

Dr. Chani

## INVOICE

74696

## DATE

4/21/26

## PRESENTING CLINICAL SIGNS

History: Recheck cardiac ultrasound and pericardial effusion

Current meds:

1. Vetmedin 2.5mg tabs: 1 tablet 2x daily
2. Enalapril 10mg 1/2 tab 2x daily
3. Lasix 20mg: 1.5 tabs 2x daily

Abnormal PE/Chem/CBC/UA Results: Abnormal CBC/ Chem findings: Not done Abnormal UA results: Not done HW4DX: Anaplasmosis +, finished Doxy

## ULTRASONOGRAPHIC EXAMINATION OF THE HEART

The echocardiogram in this patient presented persistent volume overload in the **left atrial** and **left ventricular** volume. Severe **mitral** valve insufficiency was noted with prolapse. No tamponade effect. The **pericardial** effusion is largely resolved with trace effusion remaining. There was no evidence of masses noted. **Contractility** appeared adequately compensatory. The **left ventricular outflow** tract demonstrated normal laminar flow and subjective structural integrity. The **right atrium** and **right ventricle** were unremarkable. **Tricuspid** valvular assessment demonstrated adequate linear morphology and kinesis. **Pulmonary** and **aortic** outflow is unremarkable. No pleural effusion was noted.

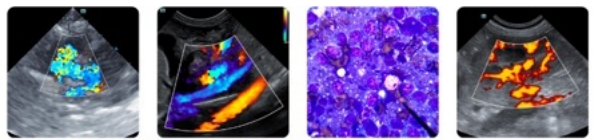
CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO	LA/AO (Heart Base)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT	5.5		2.0	2.5	45	77	0.3
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT	LA 2D short axis Base view (cm)	LVIDd 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	BELOW	BELOW	BELOW	BELOW
PATIENT		2.0		28.5 lbs	4.36	4.35	

## ULTRASONOGRAPHIC FINDINGS

Partially compensated valvular disease with nearly resolved pericardial effusion.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The cardiac presentation in this patient presented persistent left atrial and left ventricular volume overload. However, the pericardial effusion has resolved. I recommend continuation of the current



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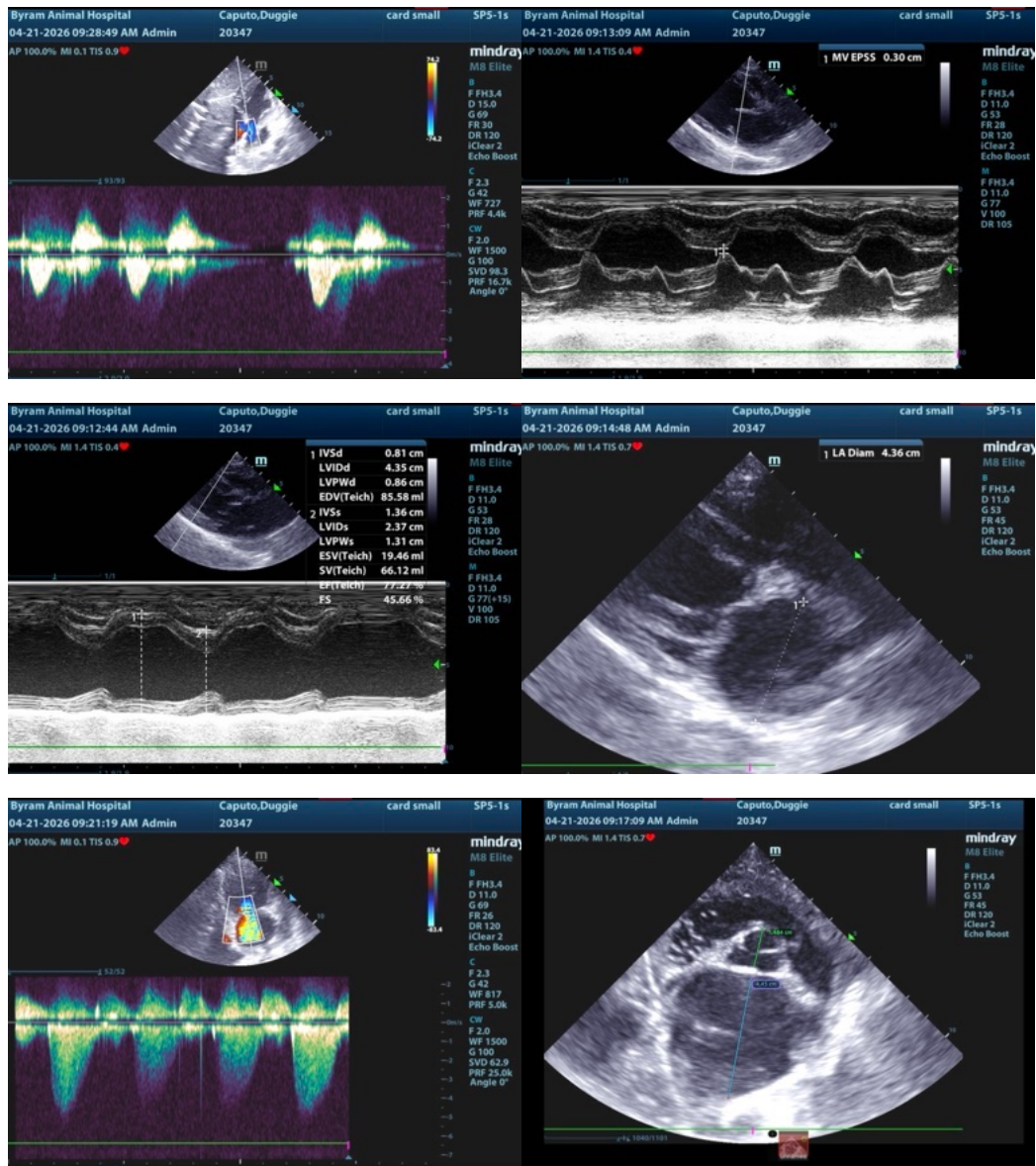
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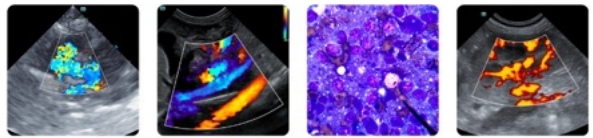
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protocol and adding Spironolactone at 1-2 mg/kg s.i.d. There was a slight increase in Lasix therapy may also be appropriate. A recheck echocardiogram is recommended in 1-3 months depending upon clinical status.





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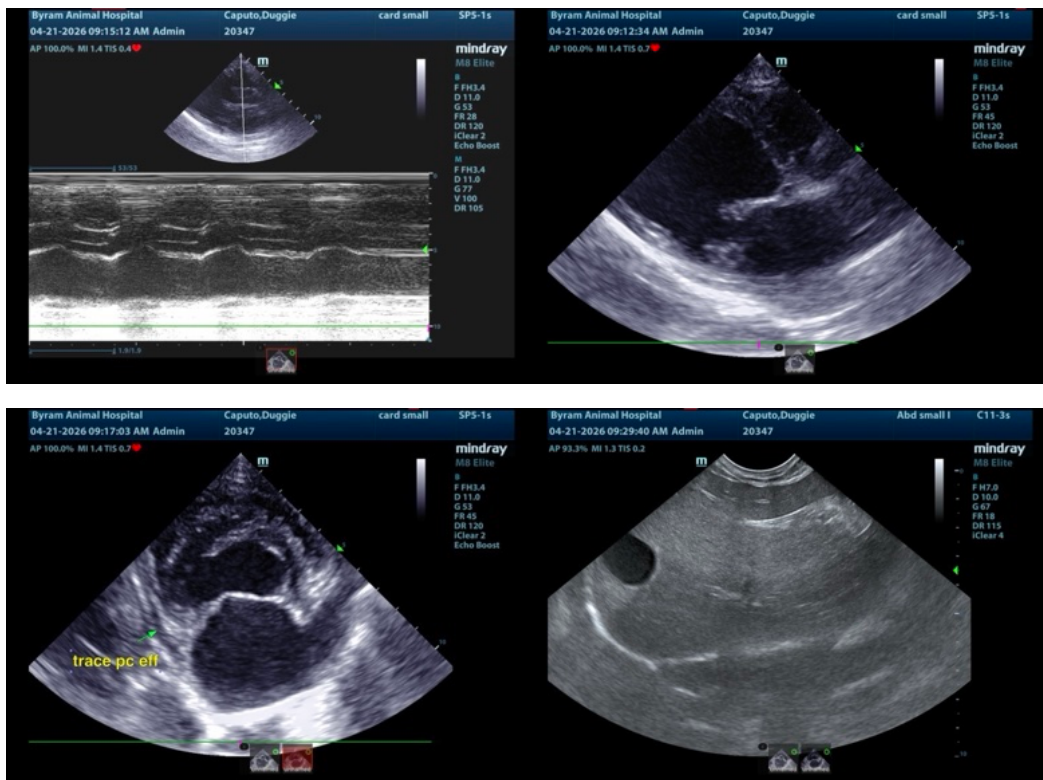
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, CEO of SonoPath.com

[info@SonoPath.com](mailto:info@SonoPath.com)