



PATIENT PRESENTING CLINICAL SIGNS

Timber Swanson

Patient scheduled for ACL surgery today, history at previous clinic--complications during anesthetic for dental cleaning. Preanesthetic ECG today: ECG AND CLINICAL ASSESSMENT: First-degree AV block is noted. First-degree AV block is most commonly secondary to increased vagal tone. Other causes include drug administration (e.g. anti-arrhythmic agents, sedatives), hyperkalemia, and hypothermia. First-degree AV block can also indicate primary AV nodal disease. Left axis deviation is noted. This could represent normal patient variation or indicate left heart enlargement. DIAGNOSTIC RECOMMENDATIONS: Left axis deviation is identified, which likely represents normal variation, unless the presence of structural heart disease is suspected based on history, diet, elevated NT-proBNP, cardiac Troponin I, or other clinical findings. Thoracic radiographs could be considered if there is other clinical or historical suspicion for cardiac disease. An atropine response test is recommended to determine the influence of vagal tone on the cardiac rhythm. Give 0.04mg/kg of atropine IV, then repeat the ECG in approximately 15 minutes. OVERALL RECOMMENDATIONS: Pending atropine response test. Gave 3cc Atropine IV, repeat ECG= ECG AND CLINICAL ASSESSMENT: There are no pathologic arrhythmias noted on this ECG tracing. Right axis deviation is noted. This could represent normal patient variation or indicate right heart enlargement. DIAGNOSTIC RECOMMENDATIONS: Thoracic radiographs and echocardiography (if available) are recommended to evaluate cardiac size and determine if the ECG changes are secondary to cardiac enlargement or represent a benign variant of normal. OVERALL RECOMMENDATIONS: Without further workup, recommend avoiding alpha-2 agonists, ketamine, or Telazol in the anesthetic protocol. Consider premedication with an opioid/benzodiazepine and induction with propofol, etomidate, or alfaxalone (preferred, if available). Abnormal PE/Chem/CBC/UA Results: Chem/CBC=WNL Radiographs appear normal

SPECIES

Canine

BREED

Golden Retriever

SEX

Neutered male

AGE

7 years

WEIGHT

106 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Nicole Gotfredson

HOSPITAL NAME

Buffalo VC

REFERRING VET

Dr. Gotfredson

INVOICE

DATE

4/22/22

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate methods of LA evaluation. The cranial and caudal **mitral** valve leaflets presented normal linear structure, extension in systole, and union in diastole with normal kinesis. 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** and auricle revealed normal size, structure and content. No evidence of masses was noted. **Tricuspid** valvular assessment demonstrated adequate linear morphology and kinesis. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **Pulmonary outflow** 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. The cranial **mediastinum and pericardial and extra-cardiac regions** were free of masses in the visible window.



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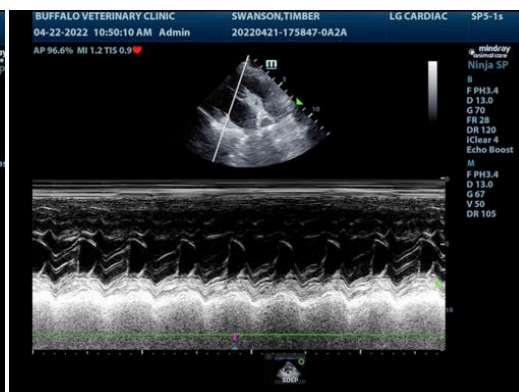
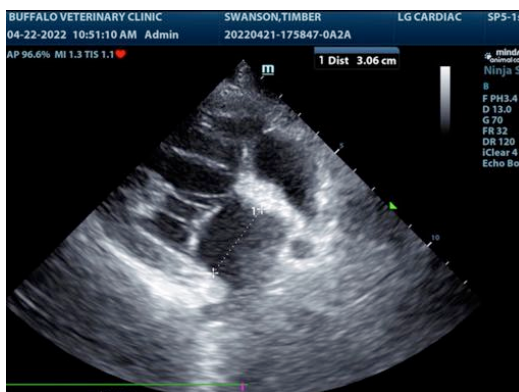
CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.3	28-40	40-100	<0.6
PATIENT			1.15	1.3	35		0.1
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LA (2D short axis 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		-	0.9	106 lbs	3.06	3.6	

ULTRASONOGRAPHIC FINDINGS

Normal echocardiogram.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of pathology.





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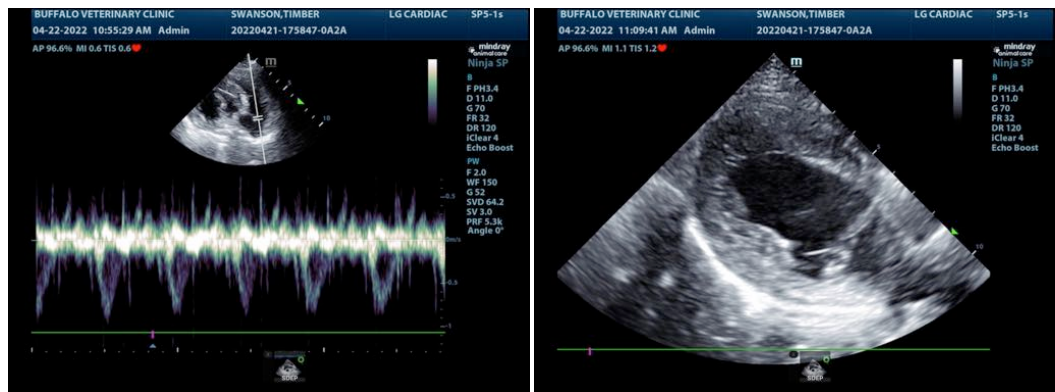
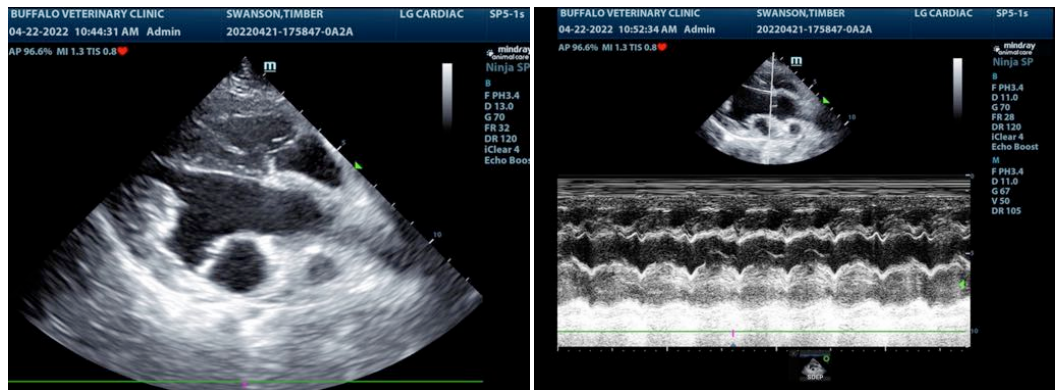
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
info@SonoPath.com