



PATIENT

Arya Hill

SPECIES

Canine

BREED

Malinois Mix

SEX

Spayed Female

AGE

12 Years

WEIGHT

66.5 Pounds

INTERPRETED BY

Eric Lindquist, DMV,
 DABVP (Canine &
 Feline), Cert. IVUSS

IMAGING PERFORMED BY

Vincetn Ravancho,
 CVT

HOSPITAL NAME

New Bridge VP

REFERRING VET

Dr. Glennon

INVOICE

36883

DATE

4/30/26

PRESENTING CLINICAL SIGNS

History: Echo for future surgical procedure. Concerned about cardiac disease. Thyroid tabs for hypothyroidism.

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	--	--	1.4	1.5	41	72	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	120	2.00	1.20	66.5	4.1	4.56	--

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate methods of LA evaluation. Trivial centralized **mitral** insufficiency was noted in this patient, not clinically significant. 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. Periodic tachycardia noted in this patient. The patient was excited at the time of the sonogram; however, I do recommend long lead 2 EKG to ensure tachyarrhythmia is not an issue. Periodic intermittent arrhythmia was also noted.

ULTRASONOGRAPHIC FINDINGS

- Trivial valvular disease, stage B1
- Periodic tachyarrhythmia



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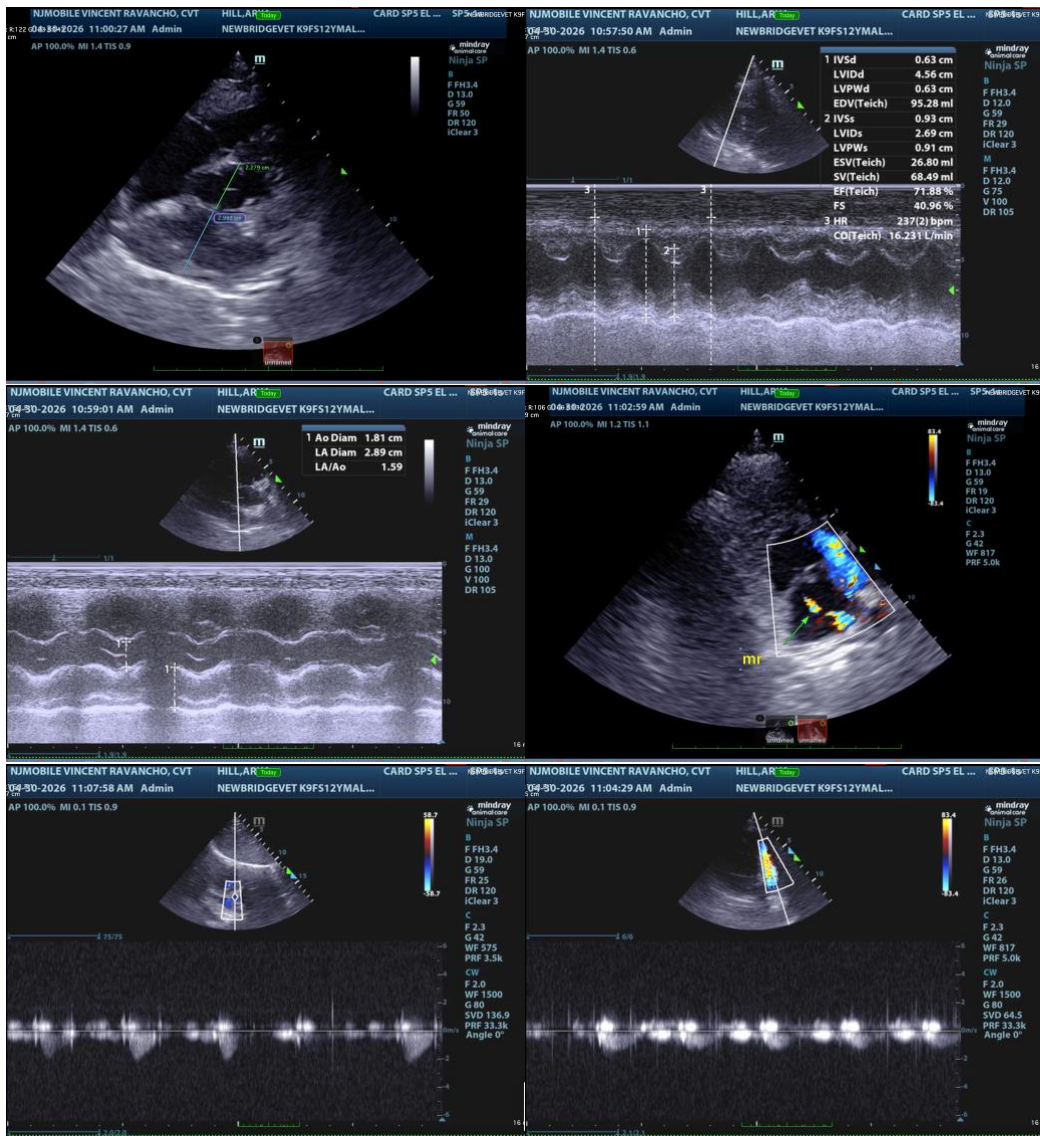
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

EKG or Holter monitor would be ideal in this patient. Holter monitor may be obtained from our office. No structural or functional issues other than the trivial mitral insufficiency. Contractility of volumes were normal.





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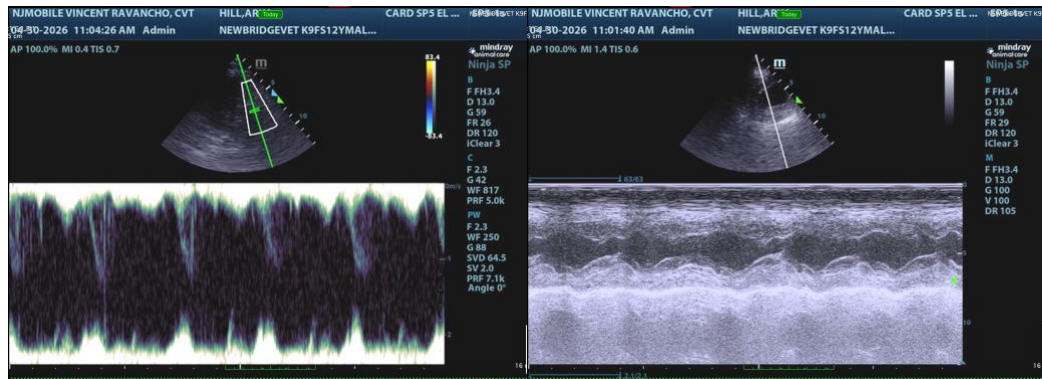
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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