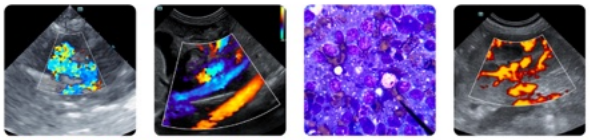


PATIENT

Margot Pray

SPECIES

Canine

BREED

Boxer

SEX

Spayed female

AGE

9 years

WEIGHT

56 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Amy Isaac

HOSPITAL NAME

Valley West & Elk Valley VH

REFERRING VET

Dr. Isaac

INVOICE

74197

DATE

4/6/26

PRESENTING CLINICAL SIGNS

- Presented last month to have her T4 checked, pet is on levothyroxine for hypothyroidism. T4 was 1.9 and weight is stable, but VPCs heard on auscultation of heart and confirmed with ECG
- ECG to cardiologist showed infrequent VPCs, rec holter monitor and/or echo to further work up. Owner elected to perform echo first, concerned that the holter monitor may not stay on due to activity level. Margot has no symptoms. Acting great at home. CBC/Chem/lytes last performed 9/2025 and were NSF other than the thyroid disease that appears well managed.

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. **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. Persistent arrhythmogenic activity was noted in this patient without evidence of structural or functional disease. An isoechoic 4.0 x 2.5 cm **aortic body tumor** was noted in this patient. This may be playing a role in the arrhythmogenic activity. It does not appear to be obstructive at this time. The hepatic veins were not dilated.

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	None	None	1.3	1.4	42	73	0.1
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	NM	None	1.0	56 lbs	3.5	3.9	

PATIENT

Margot Pray

SPECIES

Canine

BREED

Boxer

SEX

Spayed female

AGE

9 years

WEIGHT

56 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Amy Isaac

HOSPITAL NAME

Valley West & Elk Valley VH

REFERRING VET

Dr. Isaac

INVOICE

74197

DATE

4/6/26

Spleen

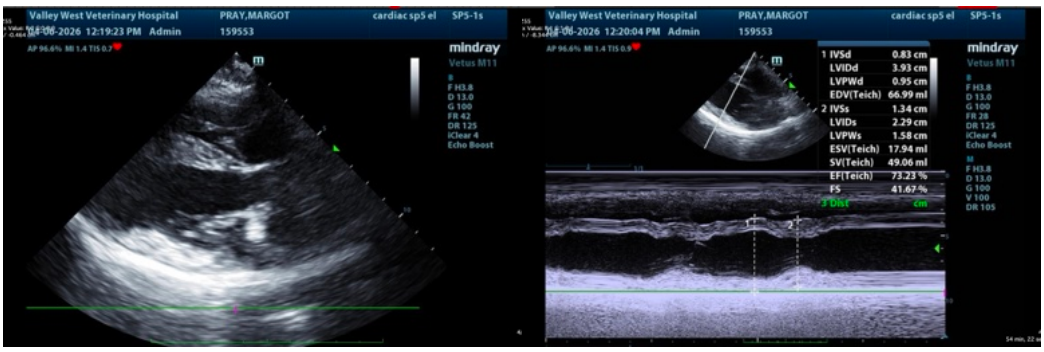
Rapid views of the spleen did not reveal any gross pathology.

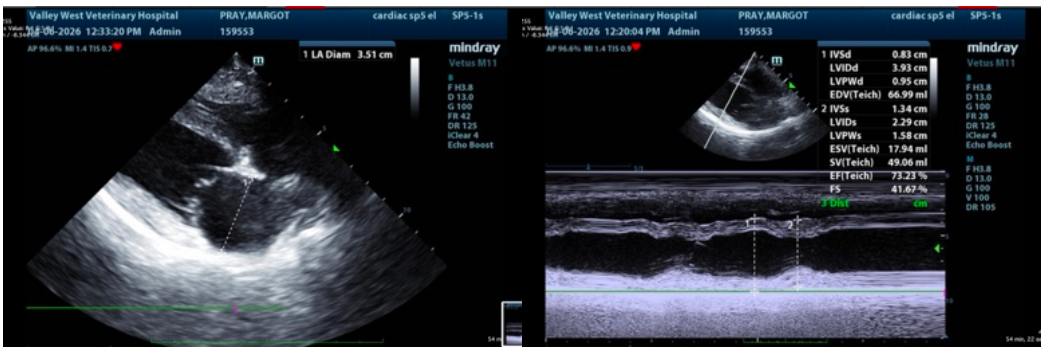
ULTRASONOGRAPHIC FINDINGS

Aortic body tumor with arrhythmogenic activity.

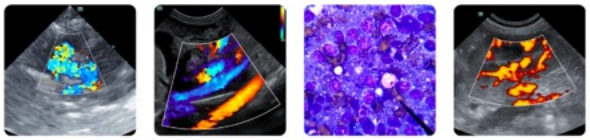
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Serial blood pressure measurements are warranted if not already performed. Holter monitor would be appropriate to assess for necessity of anti-arrhythmic therapy. The arrhythmogenic activity may be a form of Boxer cardiomyopathy or related to the aortic body tumor. These tumors are typically slow growing and currently not causing an overt issue. There is no pericardial effusion or dysfunction noted. Holter monitor may be obtained from our office with cardiologist review. Recheck echocardiogram is recommended in 3 months to assess for any growth of the aortic body mass. It is not in a position for resection.





SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Margot Pray

SPECIES

Canine

BREED

Boxer

SEX

Spayed female

AGE

9 years

WEIGHT

56 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Amy Isaac

HOSPITAL NAME

Valley West & Elk Valley VH

REFERRING VET

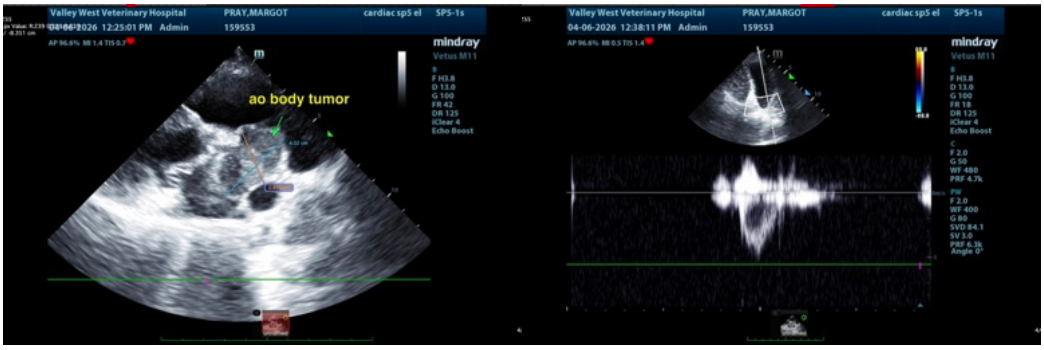
Dr. Isaac

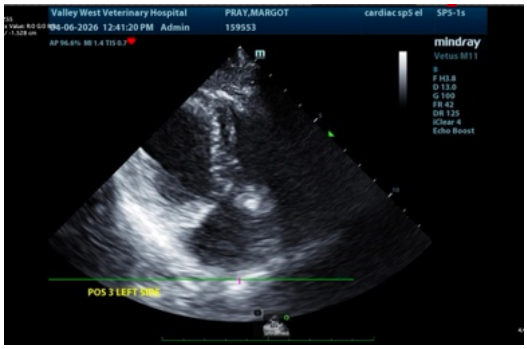
INVOICE

74197

DATE

4/6/26





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