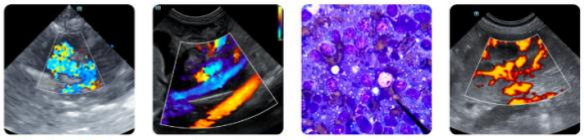



**PATIENT**

Millie Morrison

**SPECIES**

Canine

**BREED**

Not Provided

**SEX**

Female

**AGE**

3 Months

**WEIGHT**

5.5 pounds

**INTERPRETED BY**

Eric Lindquist, DMV, DABVP(CFM), Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Jeremiah Gabriel

**HOSPITAL NAME**

Central Jersey Animal Hospital

**REFERRING VET**

Dr. Jeremiah Gabriel

**INVOICE**

14940

**DATE**

04/08/26

## PRESENTING CLINICAL SIGNS

Coughing, not responsive to the medication, radiology show mild cardiomegaly

## 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 | -- | -- | NM | 1.2 | 27 | 57 | 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 | NM | -- | 0.50 | 5.5 | 1.33 | 1.6 | -- |

### *Cardiac Presentation*

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 normal thicknesses with linear contour and was not dilated nor restricted. The **myocardium** presented slightly subnormal with no significant left sided volume overload. The **left ventricular outflow** tract demonstrated normal laminar flow and subjective structural integrity. The **right atrium** was mildly enlarged. **Tricuspid** valvular assessment demonstrated adequate linear morphology and kinesis. The **right ventricle** revealed minor dilation. **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. Arrhythmogenic activity was noted in this patient.

## ULTRASONOGRAPHIC FINDINGS

- Prominent right atrium/right ventricle likely owing to primary respiratory disease.
- Arrhythmogenic activity.
- Subnormal contractility.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If this patient has any history of parvovirus, some form of myocarditis is possible. Primary respiratory protocol is warranted. An EKG is indicated. Parvo testing is indicated given the age of the patient. No gross evidence of congenital disease.

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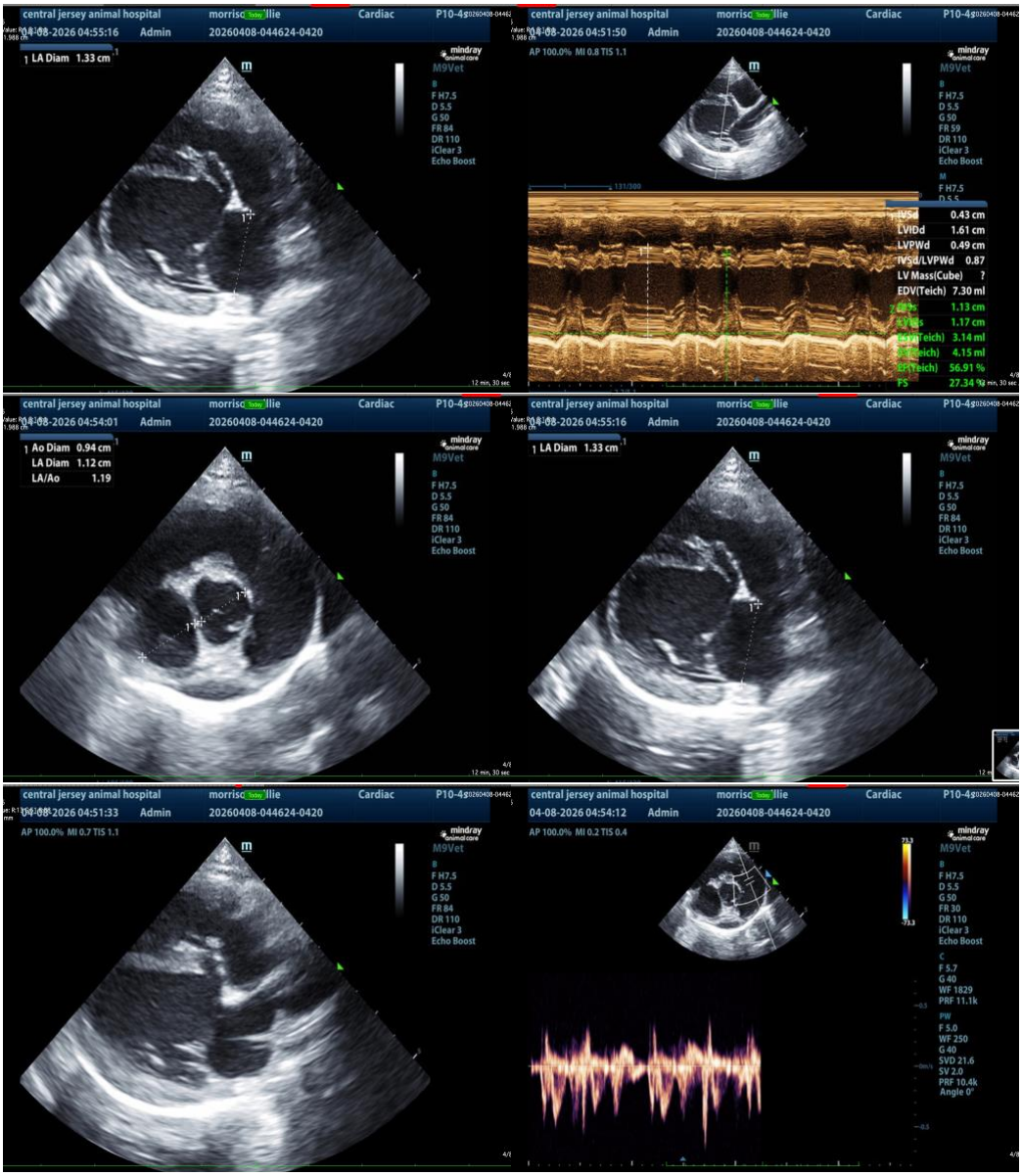


**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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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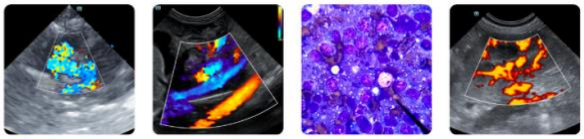

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