



PATIENT

Beamer Garciga

SPECIES

Canine

BREED

Multipoo

SEX

Neutered Male

AGE

12 Years

WEIGHT

12.4 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Vincent Ravancho, CVT

HOSPITAL NAME

Animal General on
Hudson

REFERRING VET

Dr. Zelinski

INVOICE

37221

DATE

5/26/26

PRESENTING CLINICAL SIGNS

History: Recheck heart prior to anesthesia. Echo December 2024 Stage B1 heart dz. Scheduled dental Jan 2025 for chattering teeth. During procedure - apnea, dental cancelled. Seen at OAH for mouth pain, tx w/ clindamycin, pred, gaba; improved. Off meds 2 weeks and chattering returned. Noted mandibular LN slight enlarged, declined FNA 5/21/2026. Restarted clindamycin 5/21/2026.

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	5.67	1.62	1.1	1.3	40	73	0.2
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	90	1.85	1.16	12.4	2.6	2.4	--

Cardiac Presentation

The cardiac presentation in this patient presented mitral and tricuspid insufficiency without volume overload. All four chambers were measurably normal. Contractility was normal. No pericardial or pleural effusion was noted. Mitral insufficiency was moderate and eccentric. No evidence of decompensation noted from the prior echocardiogram.

ULTRASONOGRAPHIC FINDINGS

- Persistent stage B1 valvular disease

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Anesthetic risk is minimal. The heart is stable without clinical disease. No overt contraindication for anesthesia of brief to moderate duration. I suggest Torbutrol premed, Propofol induction, Isoflo maintenance or similar protocol if anesthesia is desired. Blood pressure recommended if not already performed and target white coat negative systolic pressure of < 160 mmHg. If higher than this ACE-inhibitor is suggested to reach this level. Recheck echocardiogram is recommended in 6 months, earlier if murmur grade increases or clinical signs initiate.



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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, Owner, Founder -- SonoPath.com
info@SonoPath.com