



**PATIENT**

Buddy Witty

**SPECIES**

Canine

**BREED**

Mix

**SEX**

Neutered Male

**AGE**

13 Years 5 Months

**WEIGHT**

15 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Kerri Becker

**HOSPITAL NAME**

Sova AH

**REFERRING VET**

Dr. Dodson

**INVOICE**

37223

**DATE**

5/26/26

**PRESENTING CLINICAL SIGNS**

History: Monitoring of MVD, COHAT pending echo, grade 4/6 L systolic murmur. H/O mvd stage B2, last echo Aug. 2024. Meds- pimo 2.5mg bid

Abnormal PE/Chem/CBC/UA Results: glob-4.1 tp-7.8 usg-1.034

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

<b>CANINE CARDIAC PARAMETERS</b>	<b>MR VMAX</b> (m/s)	<b>TR VMAX</b> (m/s)	<b>LA/AO</b> (M-Mode)	<b>LA/AO</b> (Heart Base; Swe)	<b>FS</b> (%)	<b>EF</b> (%)	<b>EPSS</b> (cm)
<b>NORMAL PARAMETER</b>	4.5-5.5	<2.7	1.3	Up to 1.6	28-40	40-100	<0.6
<b>PATIENT</b>	6.0	2.5	NM	1.45	24	49	0.2
<b>CANINE CARDIAC PARAMETERS</b>	<b>HR</b> (BPM)	<b>AV VMAX</b> (m/s)	<b>PV MAX</b> (m/s)	<b>BODY WEIGHT</b> (lbs)	<b>LAD</b> LA MAX 4 Chamber	<b>LVIDd</b> Avg; 2D and m-mode short axis (cm)	<b>LVIDs</b> Avg; 2D and m-mode short axis (cm)
<b>NORMAL PARAMETER</b>	50-100	0.7-1.7	0.7-1.6				
<b>PATIENT</b>	170	1.30	.90	15	3.15	3.03	--

**Cardiac Presentation**

The cardiac presentation presented relatively normal volumes and mitral and tricuspid insufficiency with mild mitral valve prolapse. The left atrial and left ventricular volumes were compensated under current protocol. No pericardial pleural fusion were noted. Aortic and pulmonic outflows were unremarkable.

**ULTRASONOGRAPHIC FINDINGS**

- Stable, compensated, stage B2 valvular disease

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Recheck echo is recommended in 6 months. No adjustment to the cardiac protocol is recommended. Blood pressure measurements are indicated, if not already performed.



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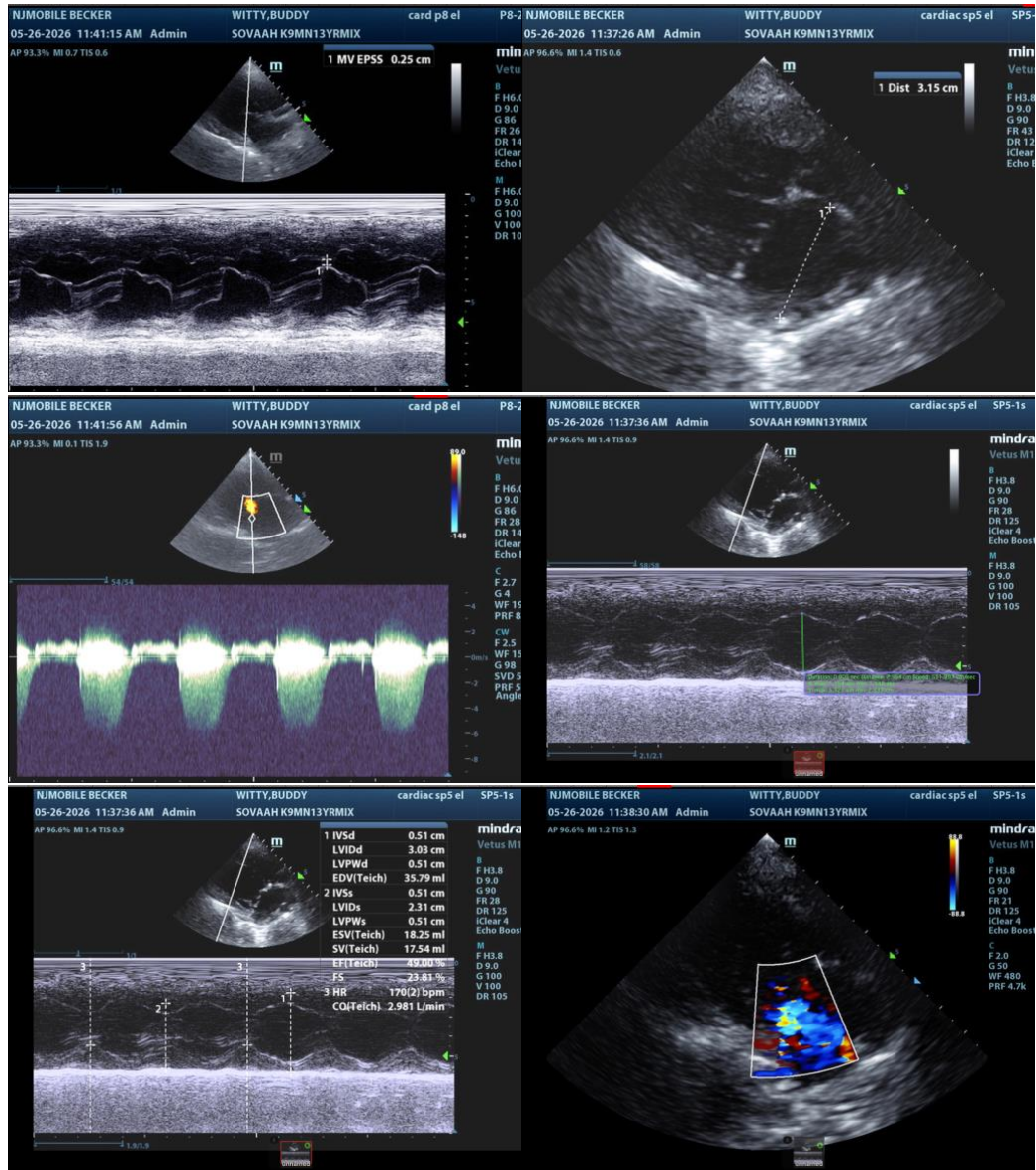
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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,  
 CEO, Owner, Founder -- SonoPath.com  
[info@SonoPath.com](mailto:info@SonoPath.com)



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