

PATIENT

Emmitt Scarpa

SPECIES

Canine

BREED

Shih Tzu

SEX

Male

AGE

13 Years 1 Month

WEIGHT

15.3 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Vincent Ravancho, CVT

HOSPITAL NAME

Legacy AH

REFERRING VET

Dr. Potenzzone

INVOICE

37220

DATE

5/26/26

PRESENTING CLINICAL SIGNS

History: Pre-Sx Echo for Dental. Elevated proBNP. Lungs normal/no obvious murmur
Abnormal PE/Chem/CBC/UA Results: Elevated proBNP

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

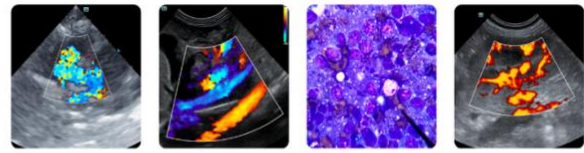
CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (M-Mode)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	Up to 1.6	28-40	40-100	<0.6
PATIENT	>5.0	3.0	1.1	1.4	42	75	0.1
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (lbs)	LAD LA 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	106	1.00	.70	15.3	2.8	2.15	--

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 different LA measurement methods. Chamber volumes and echogenicity were normal. The cranial and caudal **mitral** valve leaflets presented vegetative thickening consistent with endocardiosis. Doppler indicated trivial/minor centralized insufficiency. 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 presented mild volume overload with eccentric hypertrophy, prominent pulmonary artery and tricuspid insufficiency, consistent with mild pulmonary hypertension. No visible **pericardial** or free pleura fluid was noted. No echographically detectable evidence of infiltrative disease was visible. The cranial **mediastinum and pericardial regions** were free of masses in the visible window. The hepatic veins were not dilated. No evidence of right sided failure.

ULTRASONOGRAPHIC FINDINGS

- Mild compensated pulmonary hypertension pattern with stage B1 valvular disease



PATIENT

Emmitt Scarpa

SPECIES

Canine

BREED

Shih Tzu

SEX

Male

AGE

13 Years 1 Month

WEIGHT

15.3 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Vincent Ravancho, CVT

HOSPITAL NAME

Legacy AH

REFERRING VET

Dr. Potenzzone

INVOICE

37220

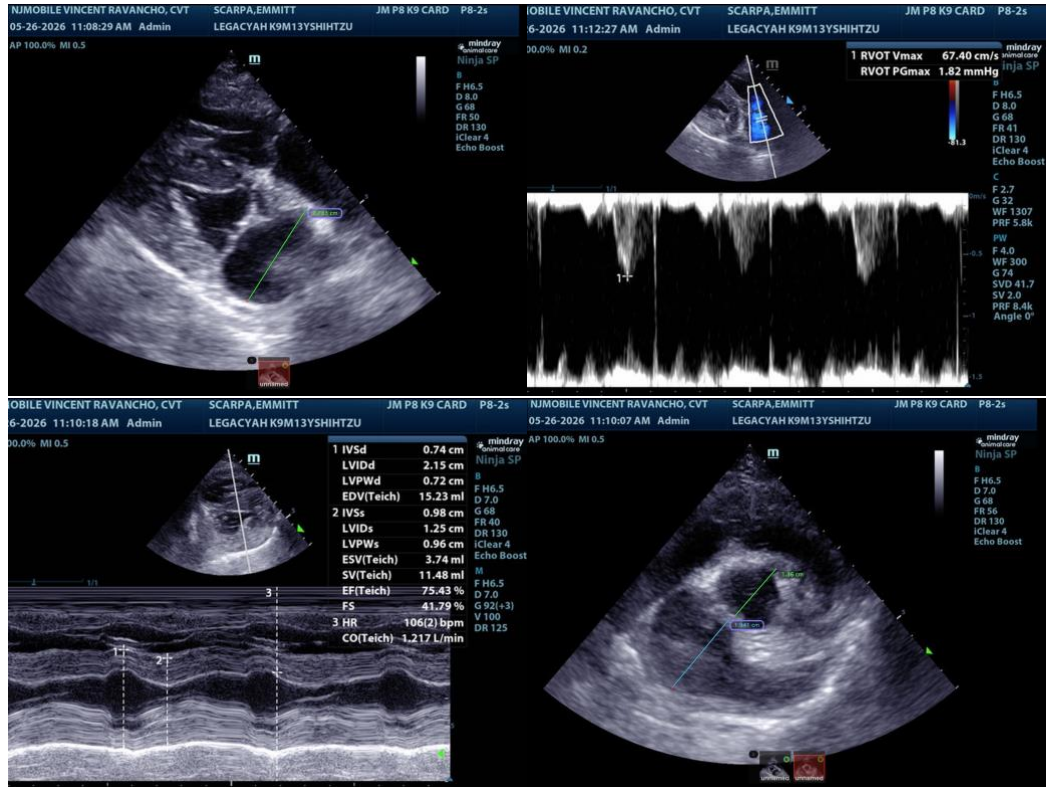
DATE

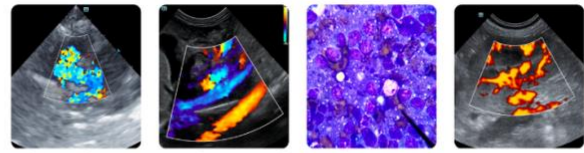
5/26/26

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Chest radiographs are warranted if not already performed to assess for primary pulmonary disease that may be influencing pulmonary hypertension. No overt contraindication to anesthetic procedure, however, adequate oxygenation, EKG, blood pressures, and pulse ox symmetry are all indicated during the procedure. Minimal amount of anesthesia is recommended.

The heart is stable without clinical disease. No overt contraindication for anesthesia of brief to moderate duration. I suggest Torbutrol premed, Propofol induction, Isoflor 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.





PATIENT

Emmitt Scarpa

SPECIES

Canine

BREED

Shih Tzu

SEX

Male

AGE

13 Years 1 Month

WEIGHT

15.3 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Vincent Ravancho, CVT

HOSPITAL NAME

Legacy AH

REFERRING VET

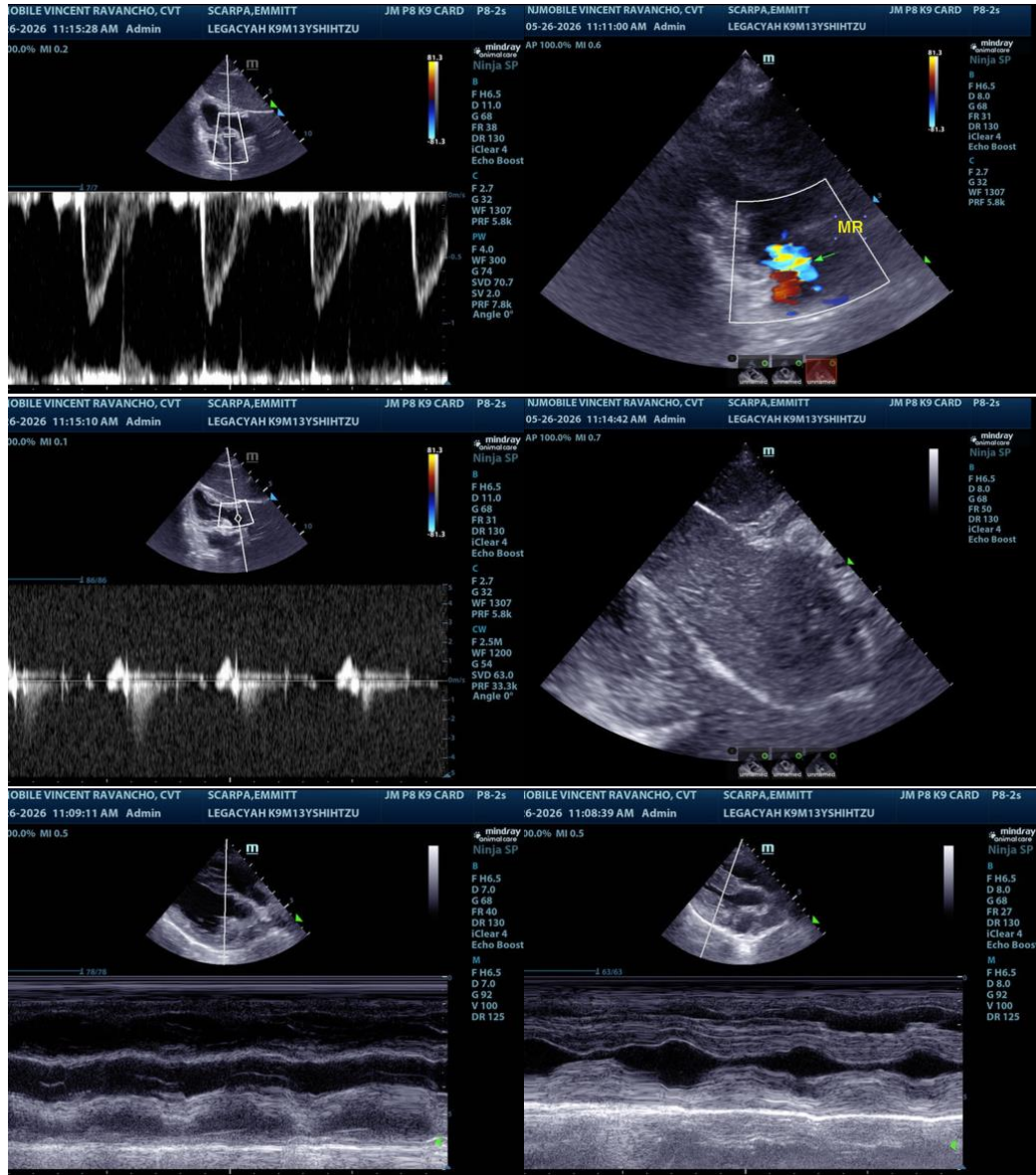
Dr. Potenzzone

INVOICE

37220

DATE

5/26/26



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