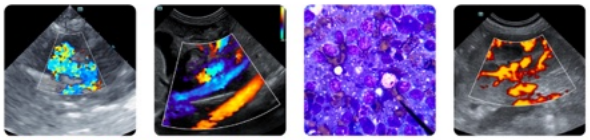

PATIENT

Ginger Haltom

SPECIES

Canine

BREED

Cockapoo

SEX

Spayed female

AGE

11 years

WEIGHT

29 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Tori Mann

HOSPITAL NAME

AC Oxford

REFERRING VET

Dr. Mann

INVOICE

78151

DATE

5/29/26

PRESENTING CLINICAL SIGNS

History: Grade 3/6 left sided heart murmur. Was prescribed vetmedin, benazepril, lasix, and clopidogrel from another vet. Owner wants to assess disease and determine which medications specifically are recommended. Patient did not have cardiac meds the morning of echo.
Abnormal PE/Chem/CBC/UA Results: High urine protein cr ratio (7) Grade 3/6 murmur

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

The echocardiogram in this patient demonstrated **mitral** valve insufficiency with volume overload of the **left ventricle** and the **left atrium**. 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 the **right ventricle** were unremarkable. **Tricuspid** valvular assessment demonstrated adequate linear morphology and kinesis. **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. Bradycardia was noted in this patient.

E Wave was excessive 1.4 m/sec.

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	NM	NM	1.6	>2.5	-	-	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	60	-	0.5	29 lbs	4.36	4.3	

ULTRASONOGRAPHIC FINDINGS

Bradycardia.

Stage B2+ valvular disease.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

EKG is indicated to assess for potential heart block. Blood pressure measurements are also indicated. I

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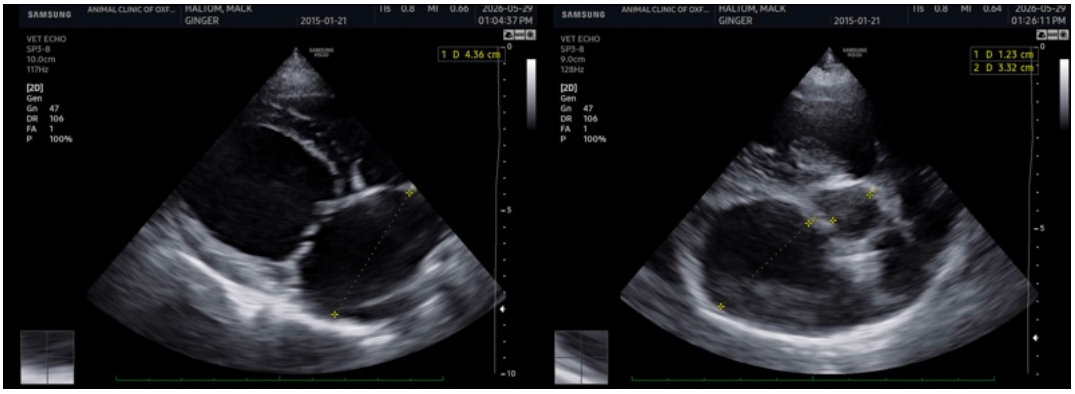
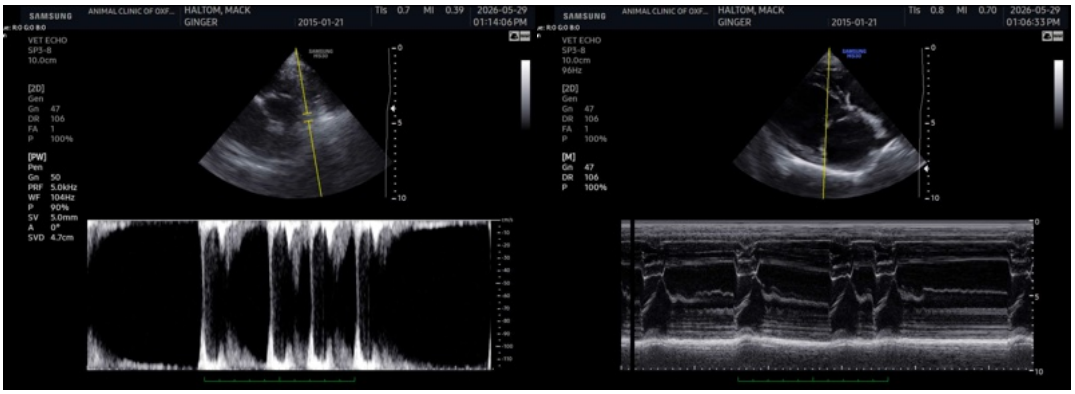
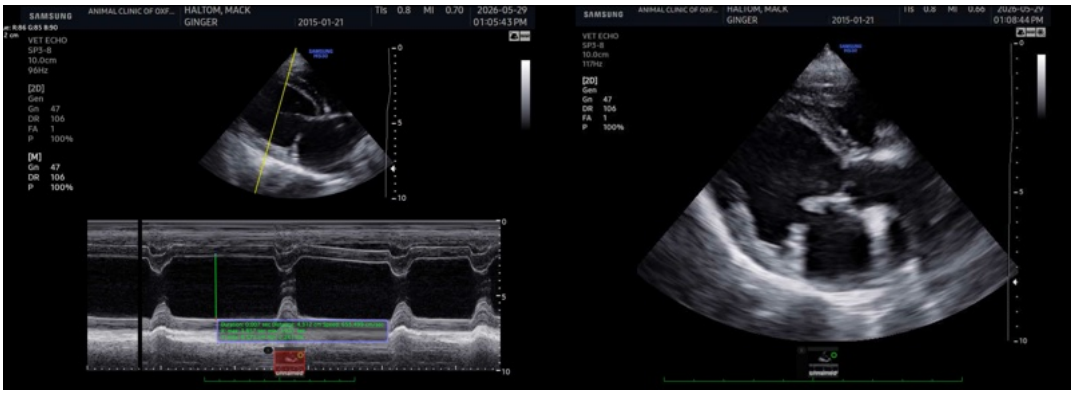
recommend continuation of the current Vetmedin, Benazapril protocol and adding Spironolactone at 1-2 mg/kg s.i.d. The use of Plavix in this patient is debatable.

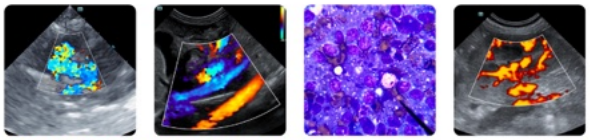
The heart is in a somewhat precarious state with volume overload and a heart that is working to compensate for the valvular insufficiency. Target respiratory rate is < 20 resp/minute after therapy. After initiating therapy, I recommend recheck on the clinical exam, BUN, Creatinine, USG, Chest radiographs & Blood pressure in 5-7 days. Recheck echo in 1 month. Earlier if clinical decompensation is occurring. I do not recommend anesthesia at this time until stabilization has occurred on the recommended medications. Repeat preanesthetic echo is ideal if anesthesia is eventually necessary.







The information and recommendations provided are based on the images presented by the



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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