



PATIENT

Lylly Varela

SPECIES

Canine

BREED

Mixed

SEX

Spayed Female

AGE

11 Years 9 Months

WEIGHT

20 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Vincent Ravancho, CVT

HOSPITAL NAME

Animal Paradise
 Hospital

REFERRING VET

Dr. Ospina

INVOICE

37329

DATE

6/3/26

PRESENTING CLINICAL SIGNS

History: Cardiogenic pulmonary edema, Mitral valve insufficiency. Current Medications - Lasix 12.5 mg 1.5 BID (started yesterday night), gave Lasix injection last night as well.

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	6.0	3.6	1.8	1.81	44	76	NM
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	102	1.90	--	20	5.0	3.8	--

**The values were likely more dramatic after Lasix therapy.

Cardiac Presentation

Severe **left atrial** enlargement was noted. Prolapse of the anterior mitral valve leaflet was noted. Doppler indicated measurable insufficiency. The **left ventricle** presented normal 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** and auricle revealed normal size, structure and content. No evidence of masses was noted or chamber overload. **Tricuspid** insufficiency was noted. Pulmonary hypertension was noted. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **Pulmonic** 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. No echographically detectable evidence of infiltrative disease was visible. The cranial **mediastinum and pericardial regions** were free of masses in the visible window.

ULTRASONOGRAPHIC FINDINGS

- Mitral insufficiency
- Stage C1 valvular disease



PATIENT

Lylly Varela

SPECIES

Canine

BREED

Mixed

SEX

Spayed Female

AGE

11 Years 9 Months

WEIGHT

20 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Vincent Ravancho, CVT

HOSPITAL NAME

Animal Paradise
 Hospital

REFERRING VET

Dr. Ospina

INVOICE

37329

DATE

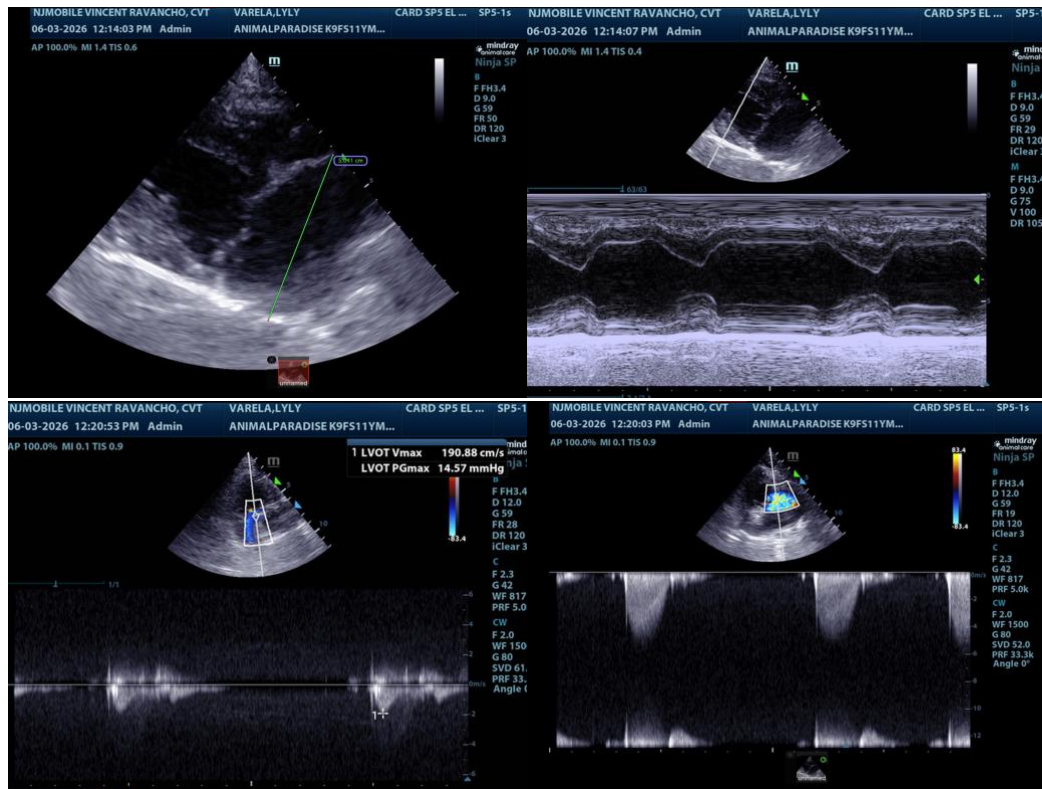
6/3/26

- Tricuspid insufficiency
- Concurrent pulmonary hypertension

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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.

Recommend initiating pimobendan at a dose of 0.3 mg/kg BID, ACE inhibitor at a dose of 0.5 mg/kg SID, progressing to BID, spironolactone at a dose of 1-2 mg/kg SID and continuation of Lasix at a dose of 2 mg/kg BID.





PATIENT

Lily Varela

SPECIES

Canine

BREED

Mixed

SEX

Spayed Female

AGE

11 Years 9 Months

WEIGHT

20 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Vincent Ravancho, CVT

HOSPITAL NAME

Animal Paradise
 Hospital

REFERRING VET

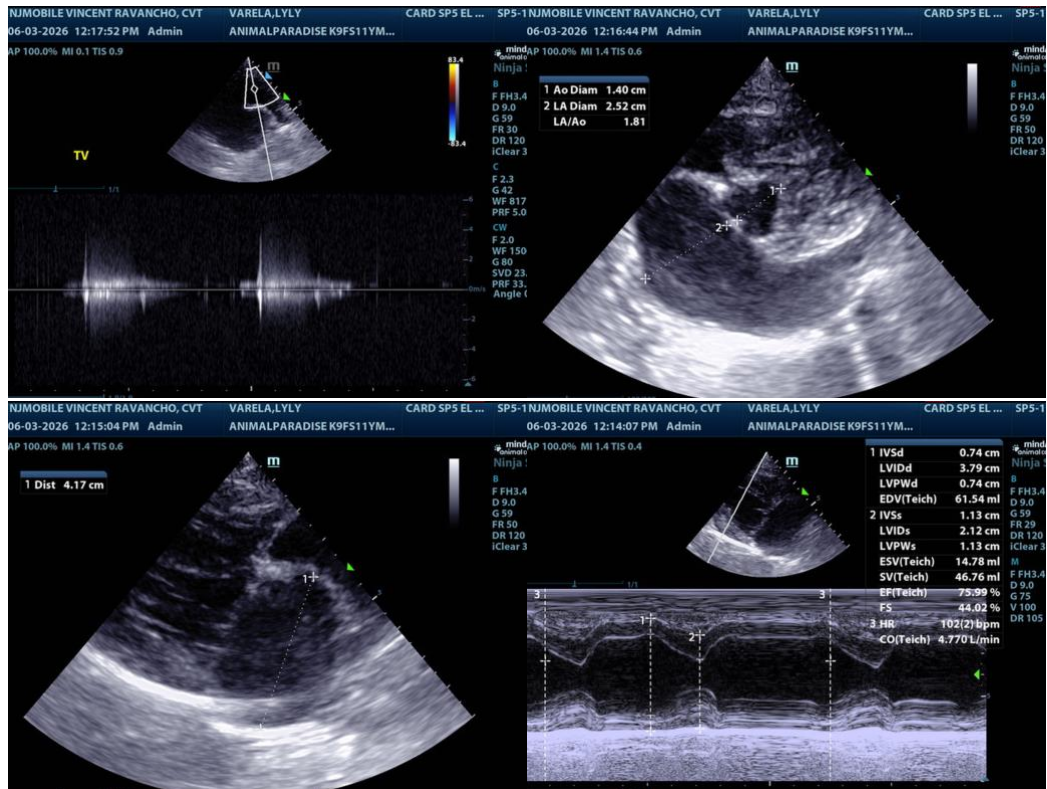
Dr. Ospina

INVOICE

37329

DATE

6/3/26



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