



PATIENT

Oslo Chalumeau

SPECIES

Canine

BREED

Boxer

SEX

Neutered male

AGE

9 years

WEIGHT

79.8 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Gunther

HOSPITAL NAME

New Frontier Animal
Medical Center

REFERRING VET

Dr. Gunther

PRESENTING CLINICAL SIGNS

History: Precious dx aortic stenosis Asymptomatic Need echo to proceed with anesthesia
Abnormal PE/Chem/CBC/UA Results: N/A

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate methods of LA evaluation. The cranial and caudal **mitral** valve leaflets presented normal linear structure, extension in systole, and union in diastole with normal kinesis. 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. Minor turbulence was noted at the **left ventricular outflow** tract/aortic valve. The **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted. **Tricuspid** valvular assessment demonstrated adequate linear morphology and kinesis. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **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. The cranial **mediastinum and pericardial and extra-cardiac regions** were free of masses in the visible window.

| CANINE CARDIAC PARAMETERS | MR VMAX (m/s) | TR VMAX (m/s) | LA/AO (Boon method) | LA/AO (Heart Base; Swe) | FS (%) | EF (%) | EPSS (cm) |
|---------------------------------|---------------------|---------------------|------------------------|-------------------------------|--|--|--|
| NORMAL PARAMETER | 4.5-5.5 | <2.7 | 1.3 | <1.6 | 28-40 | 40-100 | <0.6 |
| PATIENT | | | 1.4 | 1.4 | 32 | 61 | 0.55 |
| 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 | | 2.4 | 1.0 | 79.8 lbs | 3.93 max | 4.28 | |

INVOICE

32443

DATE

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ULTRASONOGRAPHIC FINDINGS

Mildly increased left ventricular outflow velocity.
No secondary changes.



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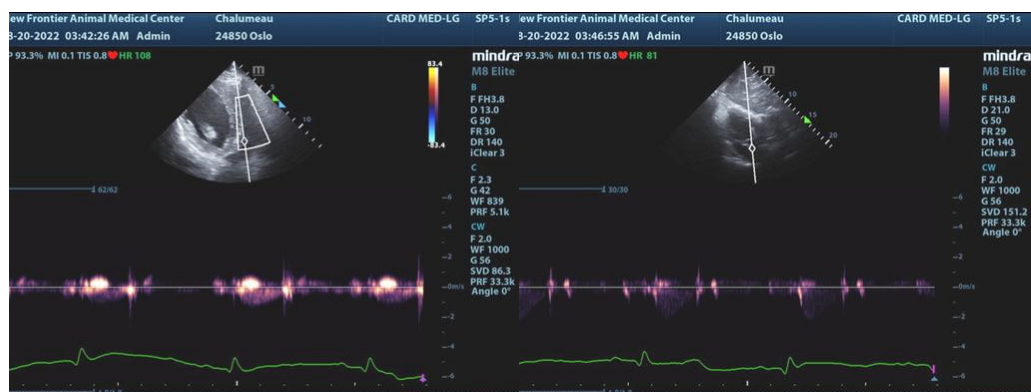
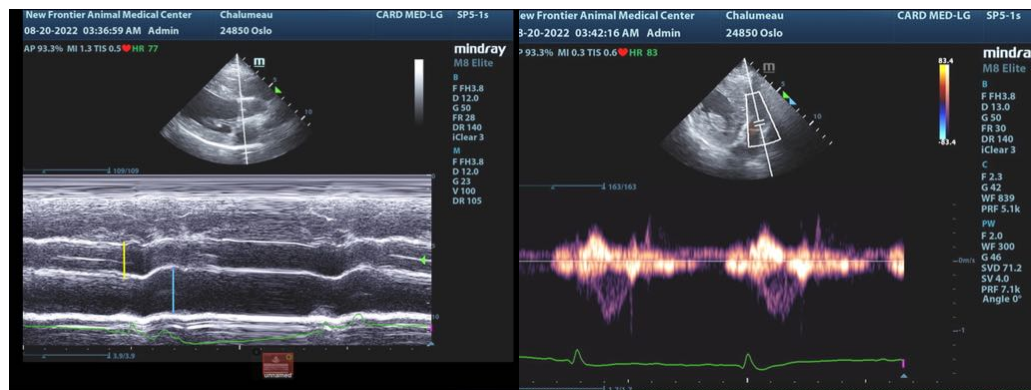
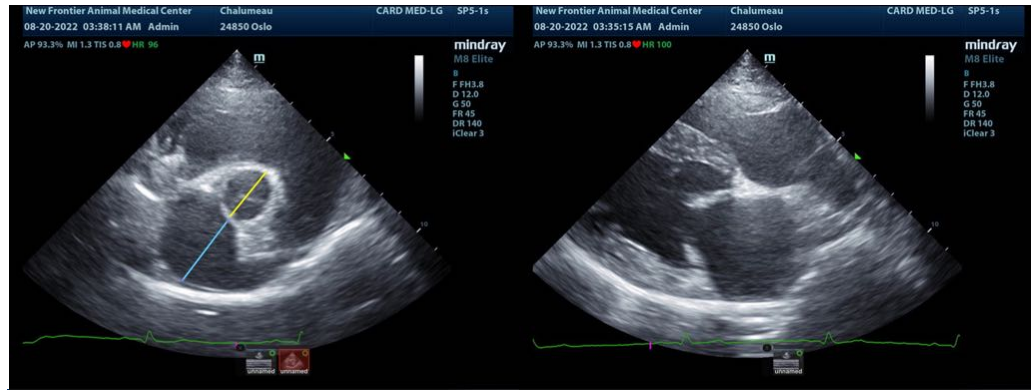
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes are consistent with minor form of subaortic stenosis or idiopathic outflow velocity. The LVOT may be slightly underestimated, yet there is no contraindication to anesthetic procedure. Prophylactic antibiotic is warranted 3 days prior and 5 days post procedure is recommended to avoid potential endocarditis.





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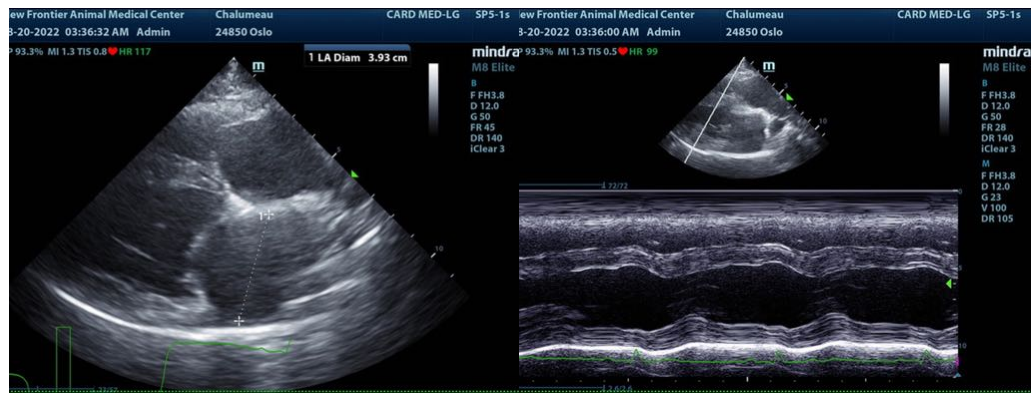
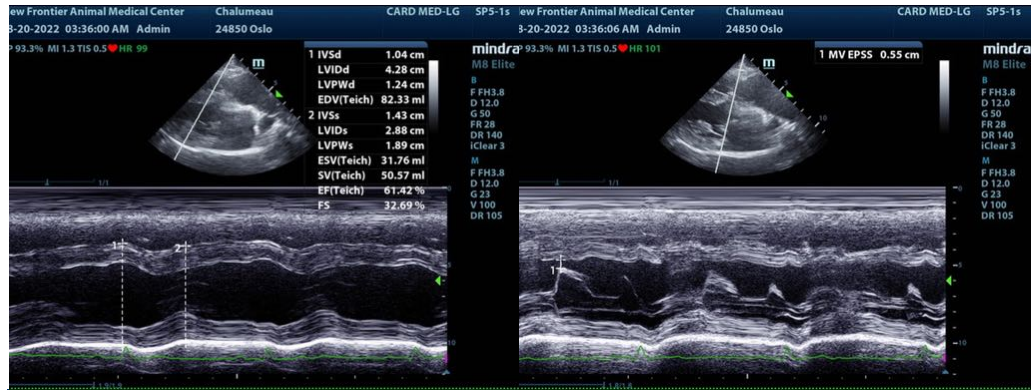
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com