



PATIENT

Cooper Peters

PRESENTING CLINICAL SIGNS

Heart murmur grade 4/6 - present for a couple years per owner Noting some exercise intolerance on walks Wanting dental cleaning - evaluate murmur first Heart Rate and Respiratory Rates 120; 18

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

BREED

Cavalier King Charles

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	5.5		1.4	1.7	45	90	0.1
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	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				
PATIENT	120	1.3	0.7		3.75	3.8	

SEX

Neutered Male

AGE

10 Years

WEIGHT

12.2 Pounds

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jenna Walsh

HOSPITAL NAME

VCA Delta Oaks AH

REFERRING VET

Dr. Ashley Robinson

Cardiac Presentation

Mild **left atrial** enlargement noted. Chamber volumes and echogenicity were normal. The cranial and caudal **mitral** valve leaflets presented vegetative thickening consistent with endocardiosis. Doppler indicated measurable insufficiency. Prolapse of the anterior mitral valve leaflet noted. 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** and auricle revealed normal size, structure and content. No evidence of masses was noted or chamber overload. **Tricuspid** valvular assessment demonstrated adequate linear morphology. 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

INVOICE

24884

- Mitral insufficiency with prolapse
- Mild left atrial enlargement
- Early Stage B2 valvular disease

DATE

8/24/21



PATIENT

Cooper Peters

SPECIES

Canine

BREED

Cavalier King Charles

SEX

Neutered Male

AGE

10 Years

WEIGHT

12.2 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jenna Walsh

HOSPITAL NAME

VCA Delta Oaks AH

REFERRING VET

Dr. Ashley Robinson

INVOICE

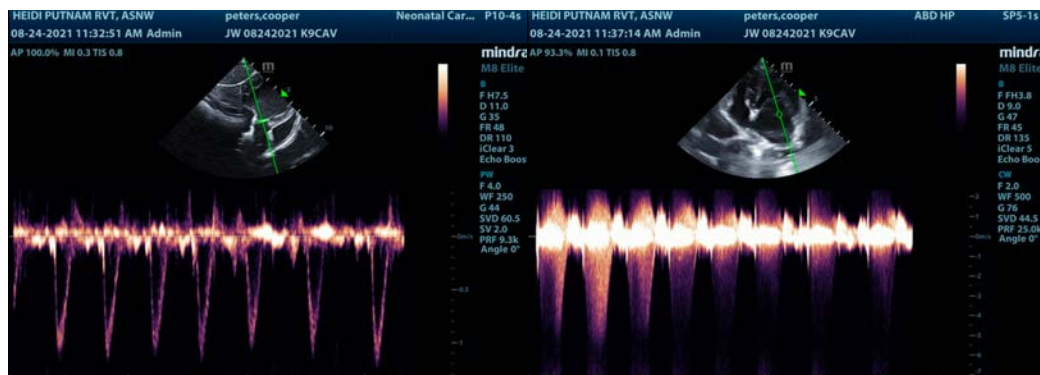
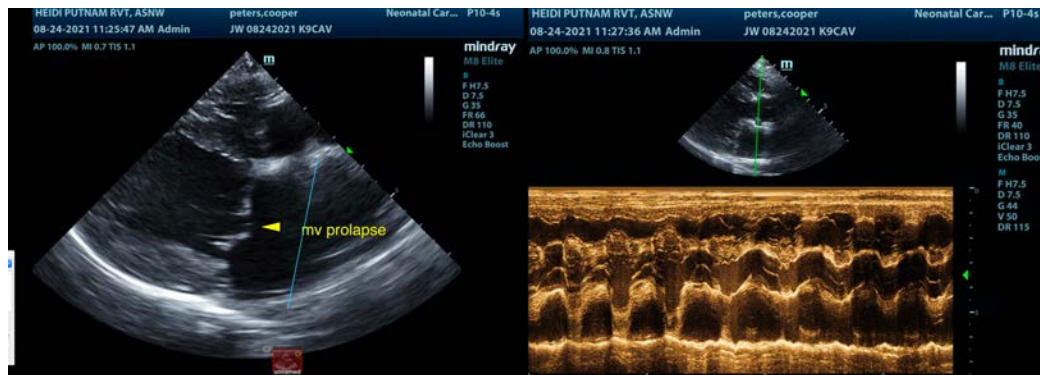
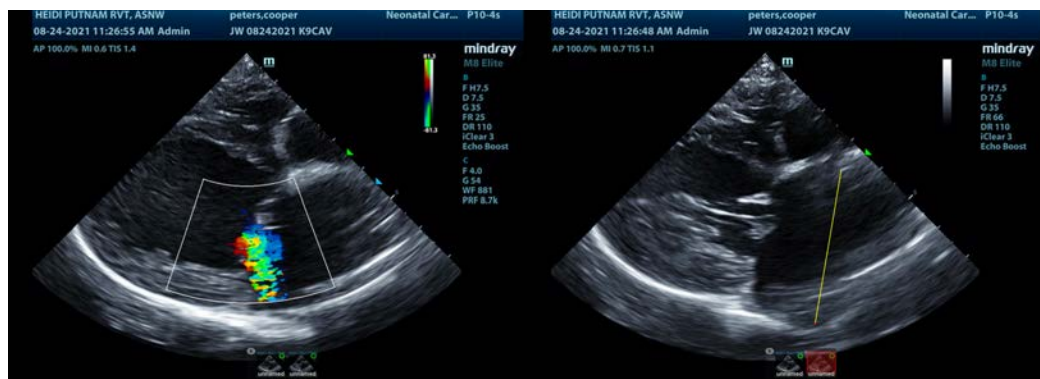
24884

DATE

8/24/21

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Based on Epic Study criteria and assuming the vertebral heart score is excessive, recommend Pimobendan at 0.3 mg/kg BID. Blood pressure measurements warranted periodically to ensure systemic hypertension is not a complicating factor. Recheck echo in 6 months, earlier if murmur grade increases or clinical signs consistent with heart disease develop. There is mild anesthetic risk in this patient. After one week of Pimobendan, if all clinical parameters and BUN, Creatinine, USG and respiratory rate are normal, then rapid light sedation with Torbutrol premed, Propofol induction, Isoflurane maintenance recommended. However, I do not recommend long sedation periods in this patient, as there is mild anesthetic risk.





PATIENT

Cooper Peters

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

SPECIES

Canine

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.

BREED

Cavalier King Charles

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com

SEX

Neutered Male

AGE

10 Years

WEIGHT

12.2 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jenna Walsh

HOSPITAL NAME

VCA Delta Oaks AH

REFERRING VET

Dr. Ashley Robinson

INVOICE

24884

DATE

8/24/21