


**PATIENT PRESENTING CLINICAL SIGNS**

Tinkerbell Coelho

History: EMPLOYEE PET, owned by rDVM's technician. We have been monitoring her heart disease. She had another CHF episode and was hospitalized last weekend on O2 and injectable lasix. Pulmonary edema on radiographs. Recheck echo today. They increased her dose of lasix to TID upon discharge this latest time. These are her current dosages: pimo 2.5 mg bid, enalapril 3.75 mg bid, lasix 12.5 mg tid, and spironolactone 12.5 mg bid, and hydrocodone PRN

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: May labwork kidney values WNL

**BREED**

Terrier mix

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

The echocardiogram in this patient presented persistent volume overload of the left atrium and left ventricle. There was prolapse of the anterior mitral valve leaflet. The right atrium and auricle revealed normal size, structure and content. No evidence of masses was noted. The right ventricle was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. Mitral and tricuspid insufficiency was noted. The patient is mildly tachycardic. There was no pleural or pericardial effusion.

**AGE**

13 years

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base;)	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	2.5	>2.5		50	80	NM
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	140	1.33	0.7	16.4 lbs	4.2	4.16	

**INTERPRETED BY**

 Eric Lindquist, DMV  
 DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Swart

**HOSPITAL NAME**

 Swart Veterinary  
 Imaging

**ULTRASONOGRAPHIC FINDINGS**

This is consistent with partially compensated C1 valvular disease.

**REFERRING VET**

Dr. Swart

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

If the hepatic veins are dilated then Sildenafil can be added at 1 mg/kg b.i.d. as the tricuspid insufficiency may be underestimated. Otherwise, Torsemide can be considered; however, it is somewhat problematic from a management standpoint. Prognosis long term is guarded. Recheck echocardiogram is recommended in 1-3 months.

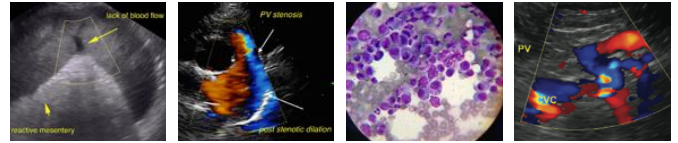
**INVOICE**

46515

Torsemide rescue therapy can be considered with attentive dose management in respect to renal/urinary side effects.

**DATE**

8/9/23



**PATIENT**

Tinkerbell Coelho

**SPECIES**

Canine

**BREED**

Terrier mix

**SEX**

Spayed female

**AGE**

13 years

**WEIGHT**

16.4 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUS

**IMAGING PERFORMED BY**

Dr. Swart

**HOSPITAL NAME**

Swart Veterinary  
Imaging

**REFERRING VET**

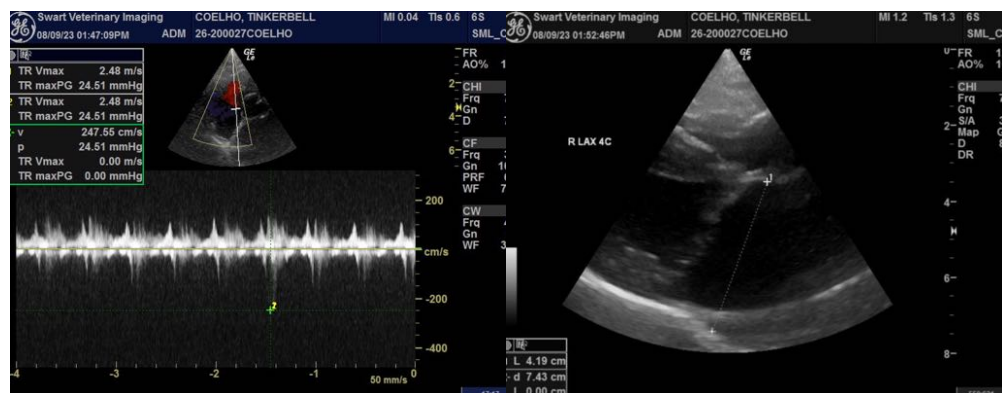
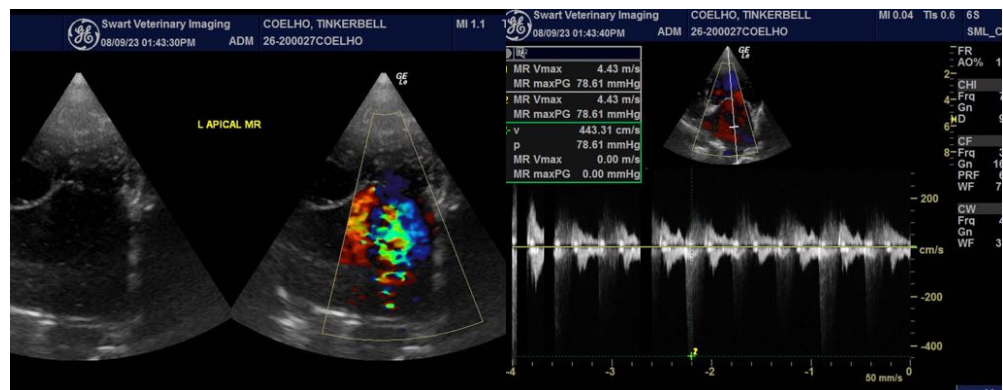
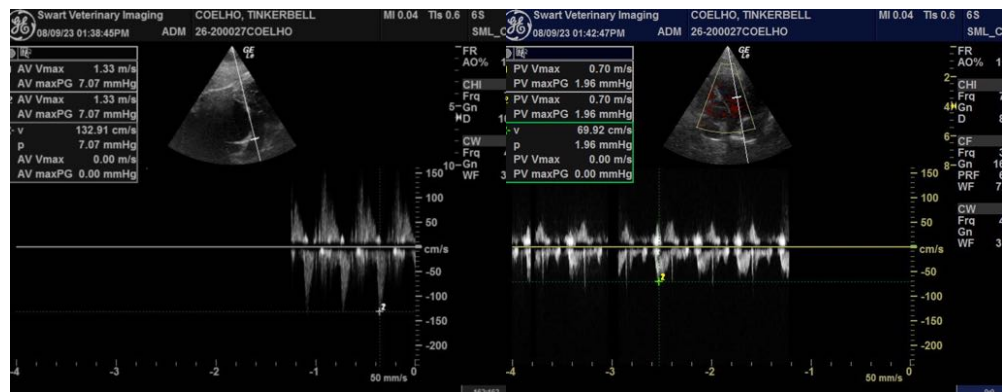
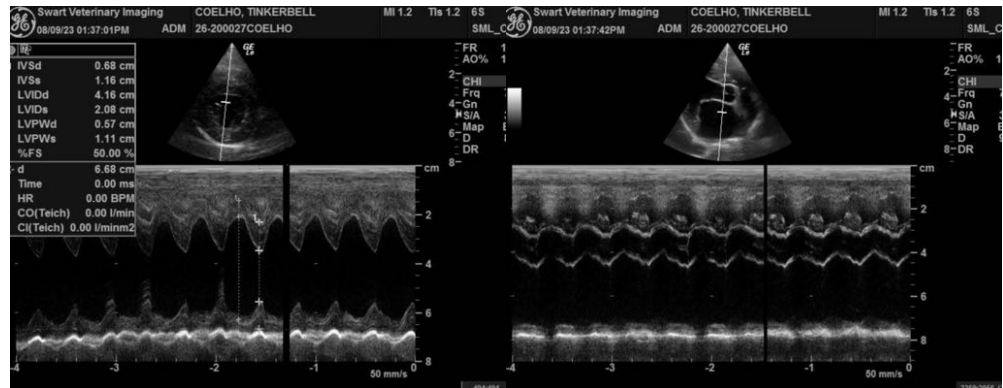
Dr. Swart

**INVOICE**

46515

**DATE**

8/9/23





**PATIENT**

Tinkerbelle Coelho

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.

**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**

Terrier mix

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

**SEX**

Spayed female

**AGE**

13 years

**WEIGHT**

16.4 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Swart

**HOSPITAL NAME**

Swart Veterinary  
Imaging

**REFERRING VET**

Dr. Swart

**INVOICE**

46515

**DATE**

8/9/23