

**PATIENT PRESENTING CLINICAL SIGNS**

**Lila Clancy** History: History of a heart murmur. Owner reports coughing at home. ++ Panting during echo. Planning for anesthesia for a possible dental w/extractions.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: PE: severe periodontal disease, systolic heart murmur Grade 4/6, potbelly appearance. BW: all WNL

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

**BREED**

Bichon Mix

**SEX**

Spayed female

**AGE**

13 years

**WEIGHT**

21 lbs

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 different LA measurement methods. Chamber volumes and echogenicity were normal. The cranial and caudal **mitral** valve leaflets presented vegetative thickening consistent with endocardiosis. Complete filling of the left atrium was noted on color flow assessment of the mitral valve. 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** 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. A sweep of the liver revealed regional thickening at the gastroesophageal inlet.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Ebersole

**HOSPITAL NAME**

Scanvet

**REFERRING VET**

Dr. Golden

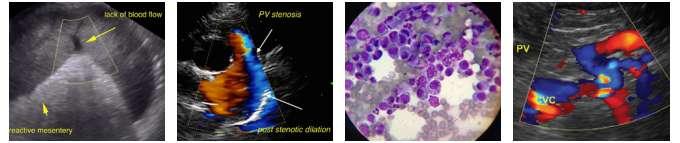
**INVOICE**

32913

**DATE**

9/14/22

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	6.0		1.4	1.5	44	76	0.4
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	127	1.94	1.1	21 lbs	3.0	3.24	



**PATIENT**

Lila Clancy

**ULTRASONOGRAPHIC FINDINGS**

Stage B1 valvular disease, no evidence of significant volume overload.

**SPECIES**

Canine

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

A sweep of the liver revealed regional thickening at the gastroesophageal inlet. Further definition is recommended with an abdominal sonogram.

**BREED**

Bichon Mix

The heart is stable without clinical disease. No overt contraindication for anesthesia of brief to moderate duration. I suggest Torbutrol premed, Propofol induction, Isoflo maintenance or similar protocol if anesthesia is desired. Blood pressure recommended if not already performed and target white coat negative systolic pressure of < 160 mmHg. If higher than this ACE-inhibitor is suggested to reach this level. Recheck echocardiogram is recommended in 6 months, earlier if murmur grade increases or clinical signs initiate.

**SEX**

Spayed female

**AGE**

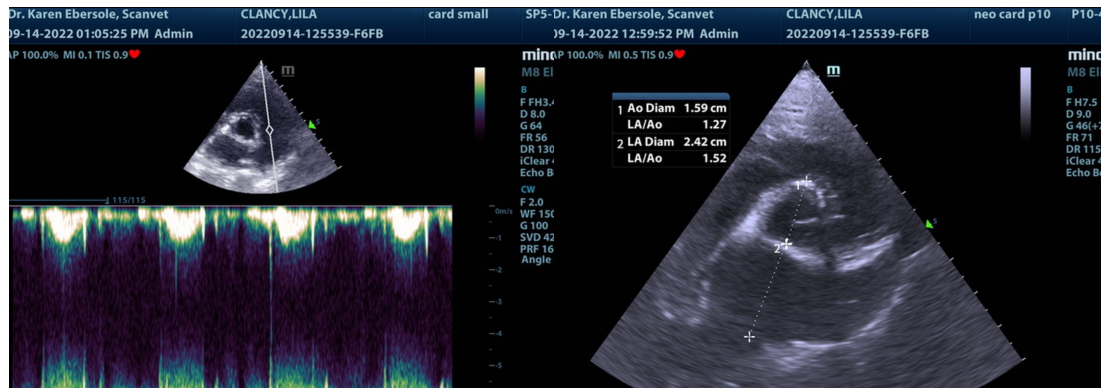
13 years

**WEIGHT**

21 lbs

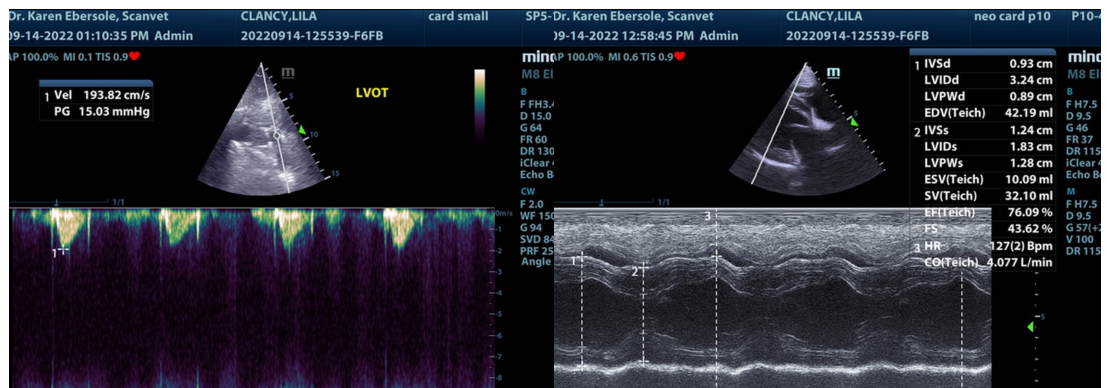
**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS



**IMAGING PERFORMED BY**

Dr. Ebersole



**HOSPITAL NAME**

Scanvet

**REFERRING VET**

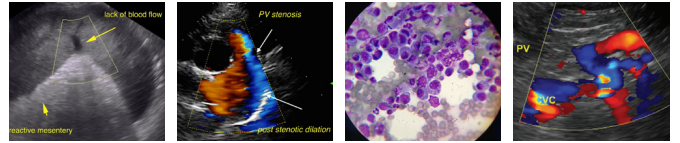
Dr. Golden

**INVOICE**

32913

**DATE**

9/14/22



**PATIENT**

Lila Clancy

**SPECIES**

Canine

**BREED**

Bichon Mix

**SEX**

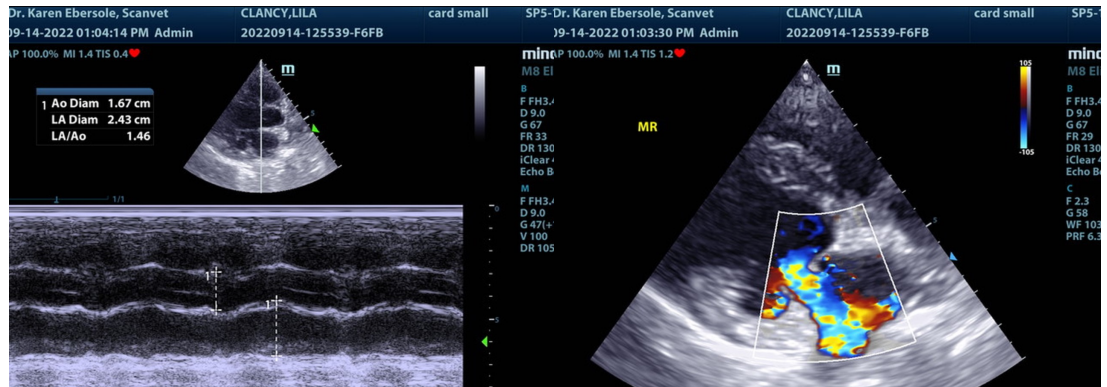
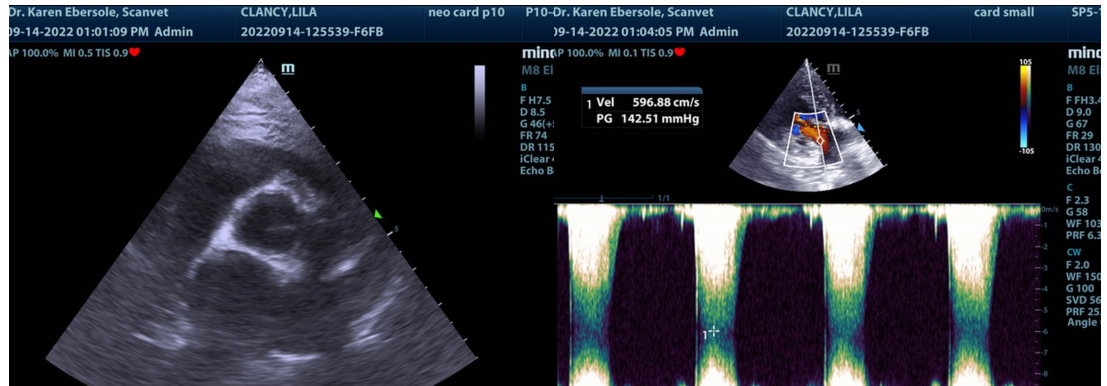
Spayed female

**AGE**

13 years

**WEIGHT**

21 lbs



**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Ebersole

**HOSPITAL NAME**

Scanvet

**REFERRING VET**

Dr. Golden

**INVOICE**

32913

**DATE**

9/14/22

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