



PATIENT

Tracie Cox

SPECIES

Canine

BREED

Schnauzer

SEX

Spayed Female

AGE

13 Years

WEIGHT

12 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Guhrun Gunther

HOSPITAL NAME

New Frontier AMC

REFERRING VET

Guhrun Gunther

INVOICE

17347

DATE

9/17/22

PRESENTING CLINICAL SIGNS

History: Diagnosed with CHF in February 2022. Hospitalized at ER clinic for stabilization. O states currently the sleeping respiratory rate is normal. Patient appears underweight but stable. Current meds: Vetmedin 1.25 mg (0.23 mg/kg) PO TID Enalapril 2.5mg (0.5mg/kg) PO BID Furosemide 12.5mg (2.3 mg/kg) PO TID Spironolactone 12.5 mg (2.3 mg/kg) PO BID Fluconazole Gabapentin

Abnormal PE/Chem/CBC/UA Results: Blood Pressure - normal Creatinine 1.3 BUN 58 Mild elevation ALT/ALP Electrolytes unremarkable CBC - mild non-regenerative anemia (35%), thrombocytosis

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

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	<1.3	28-40	40-100	<0.6
PATIENT	5.30	2.50	2.7	2.1	55	86	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	1.20	.80	--	4.05	3.87	--

Cardiac Presentation

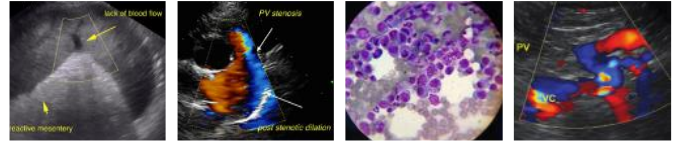
The cardiac presentation in this patient presented persistent volume overload of the left atrium and left ventricle with complete filling of the left atrium on color flow assessment. Mitral and tricuspid insufficiency were noted. Contractility appeared to be adequately compensatory with elevated fractional shortening. No pericardial or pleural effusion noted. Heart rate was slightly elevated. The hepatic veins were not dilated. No evidence of right sided failure.

ULTRASONOGRAPHIC FINDINGS

- Volume overload of the left atrium and left ventricle with complete filling of the left atrium
- Mitral and tricuspid insufficiency

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given that the sleeping respiratory rate is normal, the patient appears to be adequately compensating. Unfortunately, there is not a significant medication adjustment that can occur. If the patient enters into a left sided congestive heart failure crisis, increasing furosemide or moving to torsemide could be considered, however, torsemide is a fairly high maintenance medication to be used with caution. At this time, if the patient is not coughing, and no exercise intolerance and normal sleeping respiratory rate <25, then I do not recommend adjusting medications at this point, especially



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given the elevated BUN. Diet change to geriatric diet may be appropriate. Blood pressures should be monitored carefully. Subjectively, compared to the prior echocardiogram report, the negative progression of the pathology appears to be the issue, however, variability and measurement points can be playing a role in the value differentiation.

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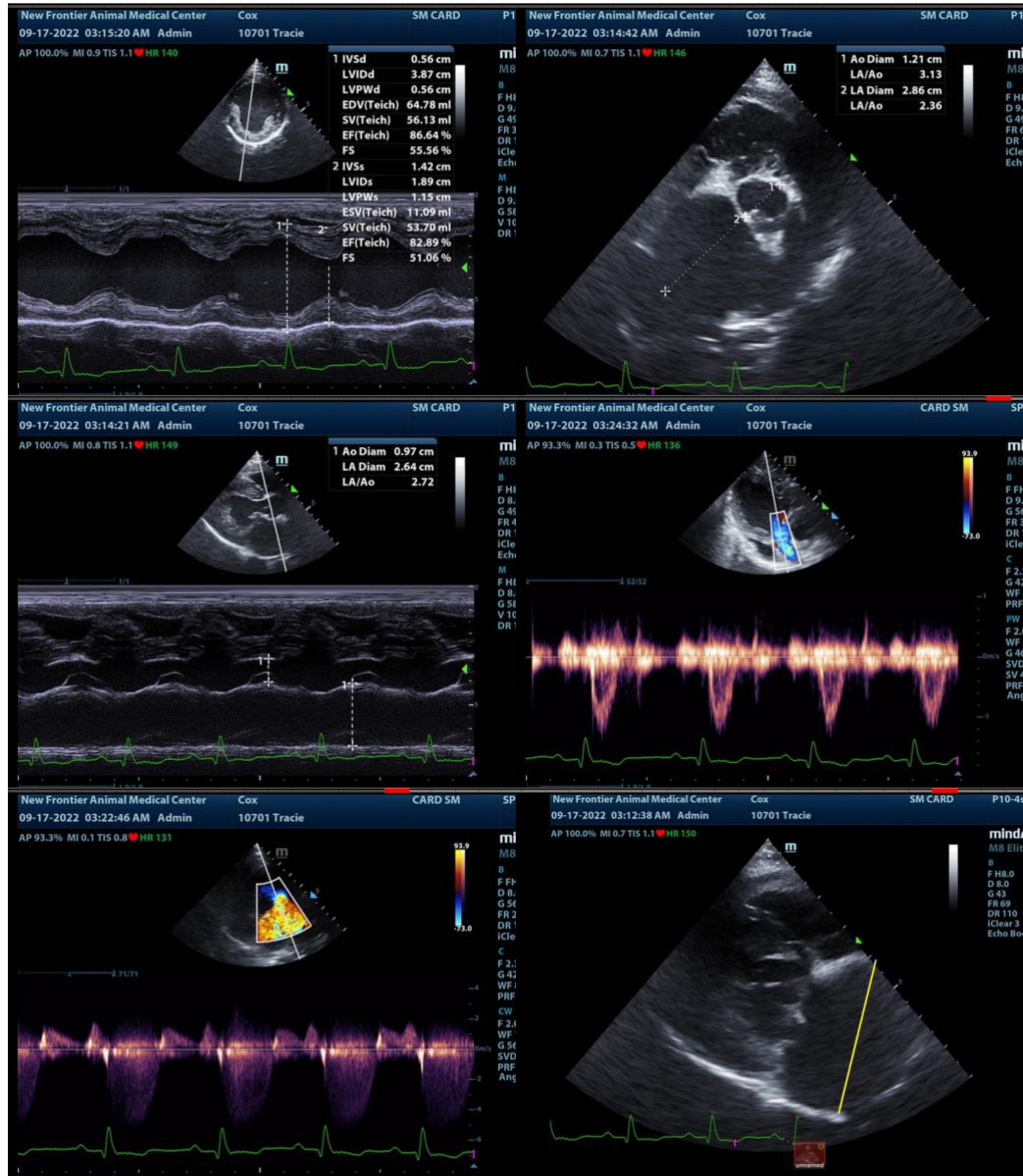
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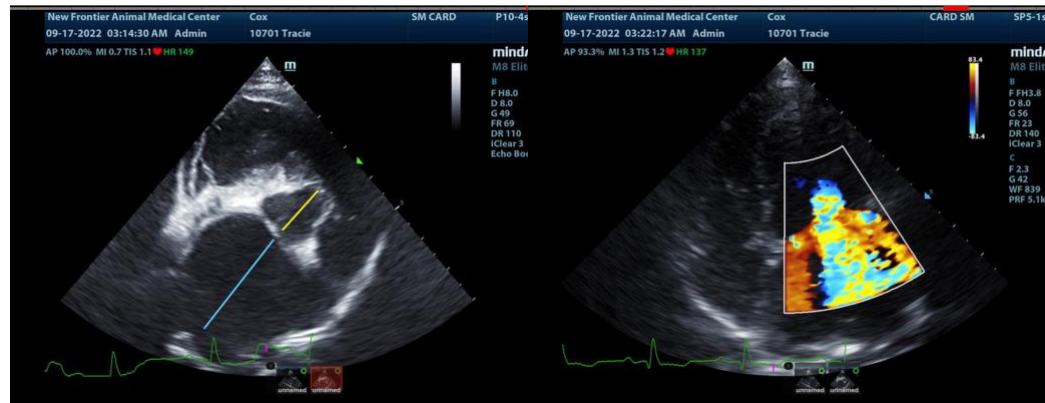
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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