



PATIENT PRESENTING CLINICAL SIGNS

PATIENT: Juliet Olsen
HISTORY: Juliet has grade 4 periodontal disease and a grade 3 heart murmur. Juliet will occasionally cough. Performing echocardiogram prior to anesthesia for dental cleaning to evaluate her heart. BP-165mmHg Chem/CBC-WNL; HWT-Neg;

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

BREED

Chihuahua

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. Doppler indicated measurable insufficiency. Minor prolapse of the anterior mitral valve leaflet was 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.

SEX

Spayed Female

AGE

9 years

WEIGHT

8.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Boley

HOSPITAL NAME

Animal Hospital
Colorado Springs

REFERRING VET

Dr. Boley

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			1.3	1.3	41	74	0.1
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				
PATIENT	143			8.6 lbs	2.6	2.72	

INVOICE

91727

ULTRASONOGRAPHIC FINDINGS

Stage B1 valvular disease.

DATE

9/8/21

No volume overload.



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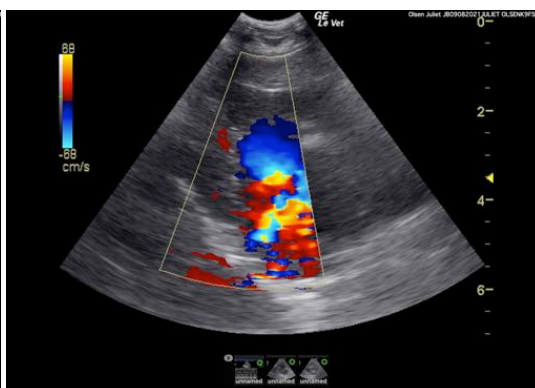
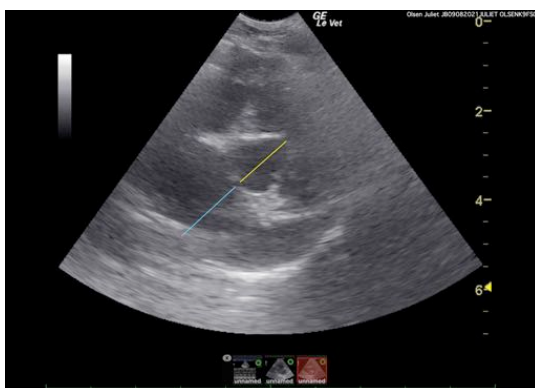
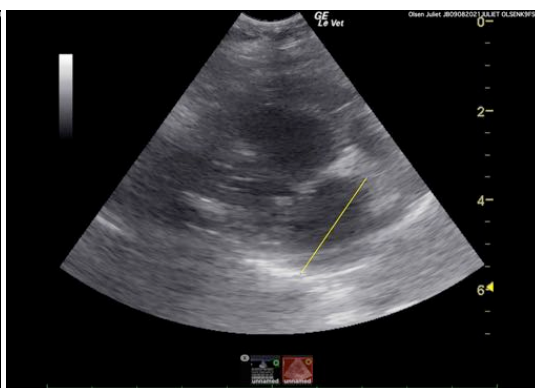
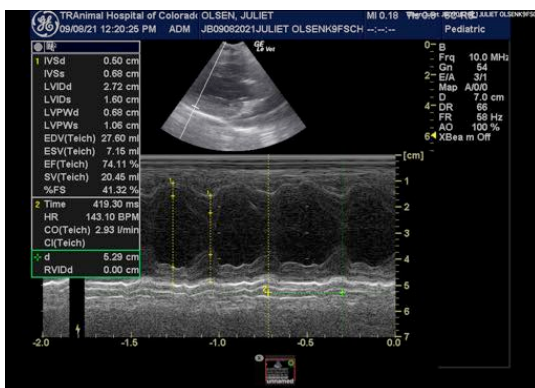
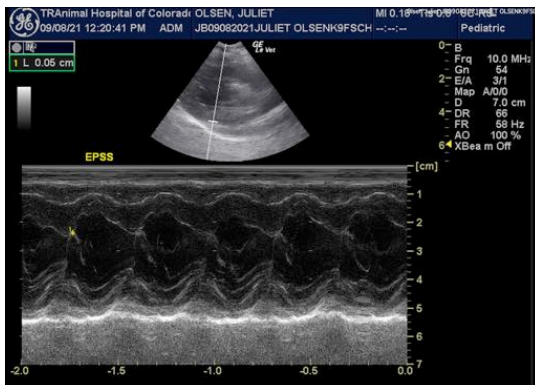
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is no overt contraindication to anesthetic procedure. Torbutrol premed, Propofol induction, and Isoflurane maintenance is recommended. Recheck echocardiogram is recommended in 6 months or earlier if murmur grade increases or clinical signs initiate. Ace inhibitor therapy is warranted given the systolic blood pressure of 165. I recommend reducing that to less than 150 prior to any anesthetic procedure.



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.



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

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