
PATIENT PRESENTING CLINICAL SIGNS

 52457 Charleston
 Animal Society

SPECIES

Canine

BREED

 Staffordshire Terrier
 Mix

SEX

Intact female

AGE

7/13/21

WEIGHT

15 lbs

Presents partially/fully deaf
 Head tilt, ataxia
 Deformation to ventral chest wall in area of sternum— no palpable xiphoid
 Survey chest rads showed grossly enlarged heart with elevation of trachea
 176/56, BP not avail. Puppy is very high energy, so HR is “resting” but not really
 Radiographs revealed generalized cardiomegaly with incomplete diaphragmatic detail.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART AND CRANIAL ABDOMEN
Urinary System

Multiple normal and alternative approaches to the heart and cranial abdomen were performed in this patient. The liver presented passive congestion and pericardial diaphragmatic hernia of the liver was present. The gallbladder was herniated into the caudal thorax. The pericardium in the right heart and heart base were occupied by hepatic tissue. The right heart was slightly enlarged with a prominent right atrium and 1:1 ratio with the left atrium. Minor tricuspid insufficiency was noted. The right ventricle was mildly enlarged. Elongated papillary muscles were present in the right ventricle particularly that of the attachment to the free wall leaflet. Concurrent primary tricuspid dysplasia may be an issue, but it is not the primary issue at this time. The left ventricle presented normal internal volume with hypokinetic left ventricular free wall. The left ventricular outflow tract, left atrium and mitral valve leaflets were unremarkable.

INTERPRETED BY

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

IMAGING PERFORMED BY

 Andrea Nicastro, DVM,
 Diplomate ACVIM
 (Small Animal Internal
 Medicine)

HOSPITAL NAME

 Charleston Animal
 Society

REFERRING VET

Dr. Fuller

INVOICE

92106

DATE

9/30/21

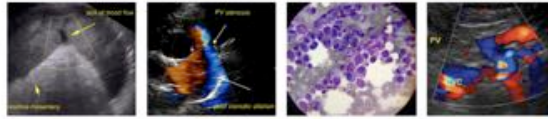
CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT			1.15	1.4	25	60	0.1
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT	LA 2D short axis Base 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		WNL	0.5	15 lbs	2.1	3.0	

ULTRASONOGRAPHIC FINDINGS

Pericardial diaphragmatic hernia with herniated liver in the pericardium around the heart base and right ventricle.

Concurrent tricuspid insufficiency. Possible minor form of tricuspid dysplasia.

Passive congestion liver pattern likely owing to physical obstruction of the caudal thoracic vena cava owing to the herniated tissue.



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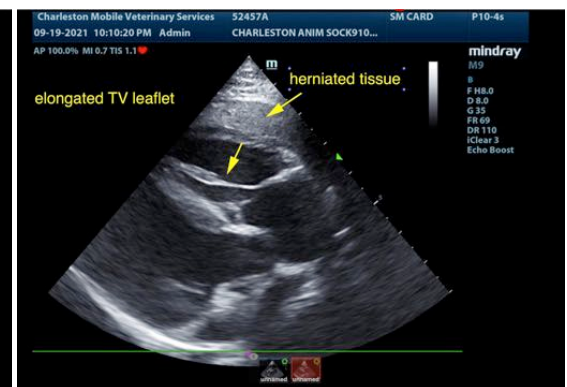
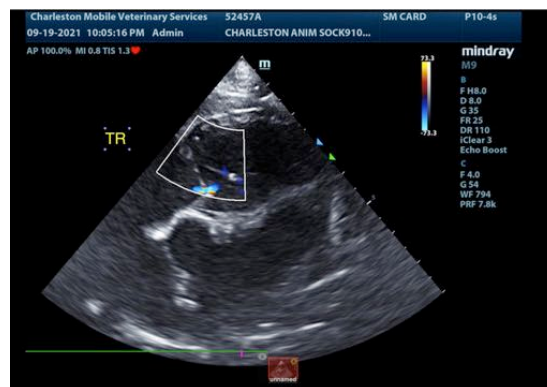
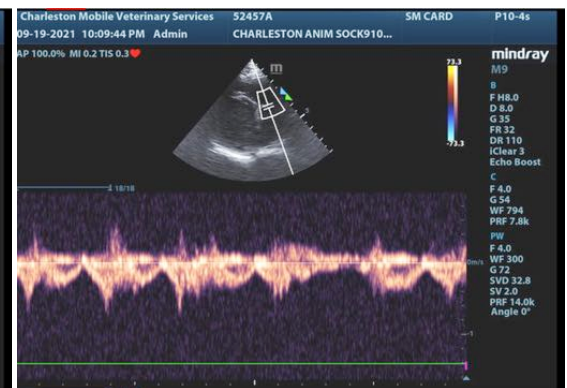
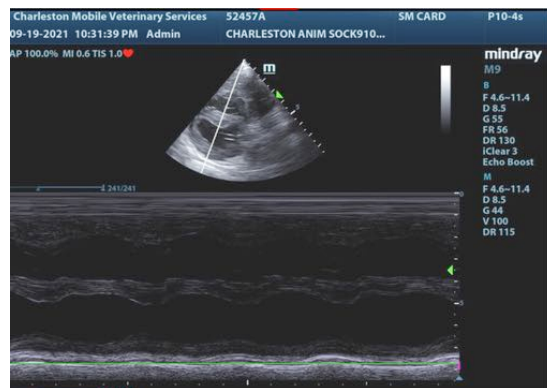
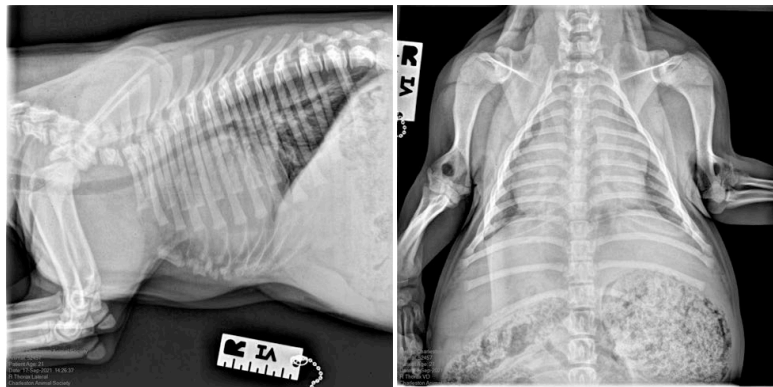
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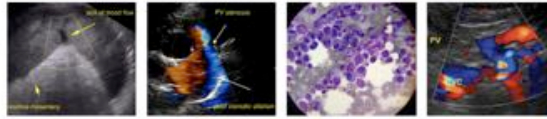
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT evaluation would be ideal for further definition. Surgical approach may be possible, yet may be somewhat problematic. The patient may be able to manage with this congenital defect long term. No therapy is recommended at this time. If respiratory distress is an issue then CT evaluation and surgical consultation is recommended.





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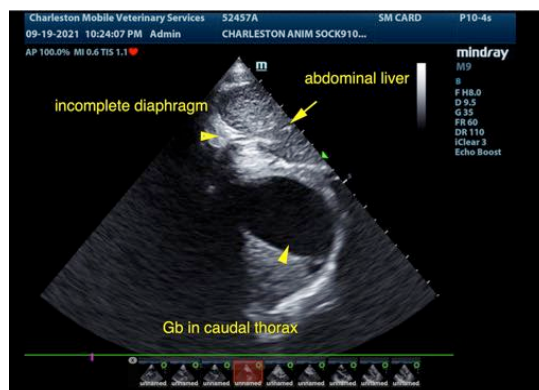
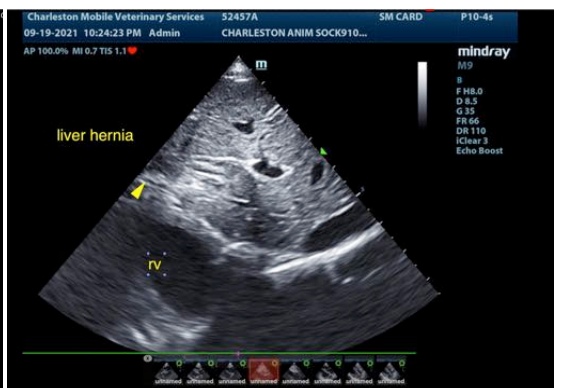
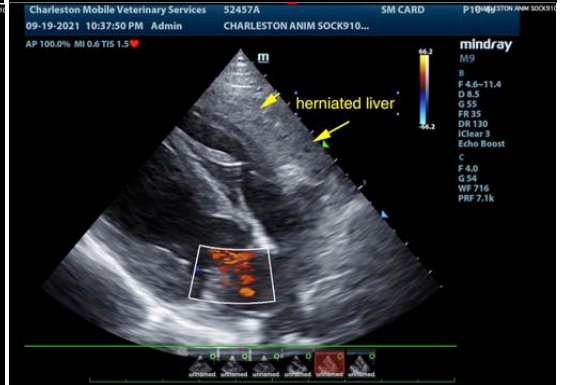
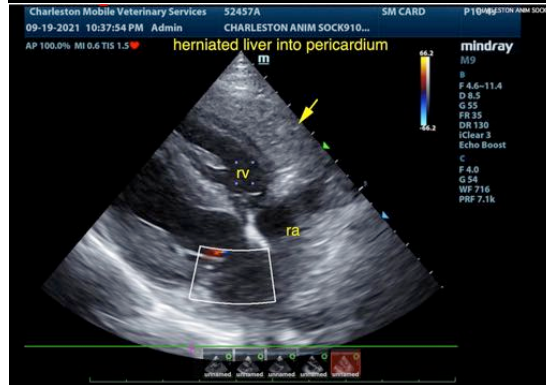
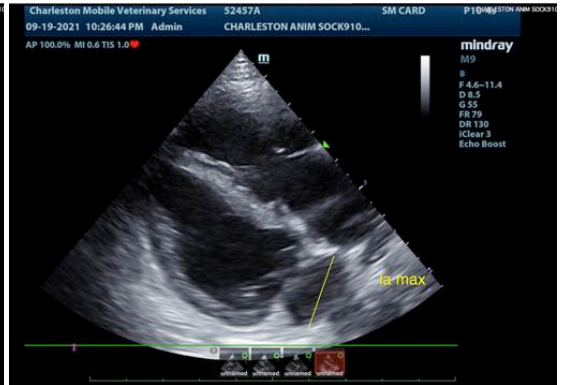
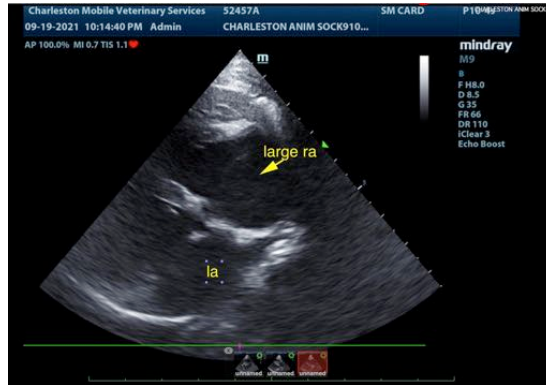
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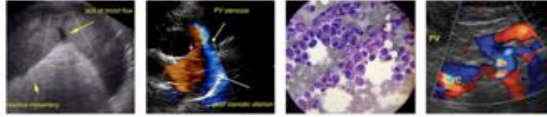
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The information and recommendations provided are based on the images presented by the referring



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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

Info@SonoPath.com