



PATIENT

Shino Goletz

SPECIES

Canine

BREED

Standard Poodle

SEX

Neutered male

AGE

12 years

WEIGHT

39.2 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

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HOSPITAL NAME

Greenwood Lake AH

REFERRING VET

Dr. Streng

INVOICE

73540

DATE

3/17/26

PRESENTING CLINICAL SIGNS

Grade III/VI, cough. Left atrial enlargement noted on radiographs, cough.

CBC/chem normal

Lyme and Anaplasma positive.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

The echocardiogram in this patient presented moderate to severe volume overload of the left atrium and left ventricle. There was prolapse in the anterior mitral valve leaflet. Severe mitral and tricuspid insufficiency was noted. Right atrial and right ventricular dilation was noted with mild pulmonary artery dilation was also noted. Pulmonic insufficiency was noted. Tricuspid insufficiency velocity was consistent with pulmonary hypertension. Radiographs revealed cardiomegaly, left atrial enlargement and chronic bronchial changes with slight pulmonary edema. Lung rockets were noted in the extracardiac space.

The vena cava was dilated at 1.35 at the level of the diaphragmatic inlet. No ascites was noted at this point. However, hepatic vein dilation was present.

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO	LA/AO (Heart Base)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT	5.36	4.16	1.8	2.1	40	71	0.5
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	190	1.3	1.1	39.2 lbs	6.3	5.35	

ULTRASONOGRAPHIC FINDINGS

- Early stage C1 valvular disease with concurrent bronchial disease.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend initiating Pimobendan at 0.3 mg/kg b.i.d., ace inhibitor at 0.5 mg/kg s.i.d. progressing to b.i.d., Spironolactone at 1-2 mg/kg s.i.d. and Lasix at 1-2 mg/kg b.i.d. Recheck echocardiogram in a month. Prognosis is very guarded.



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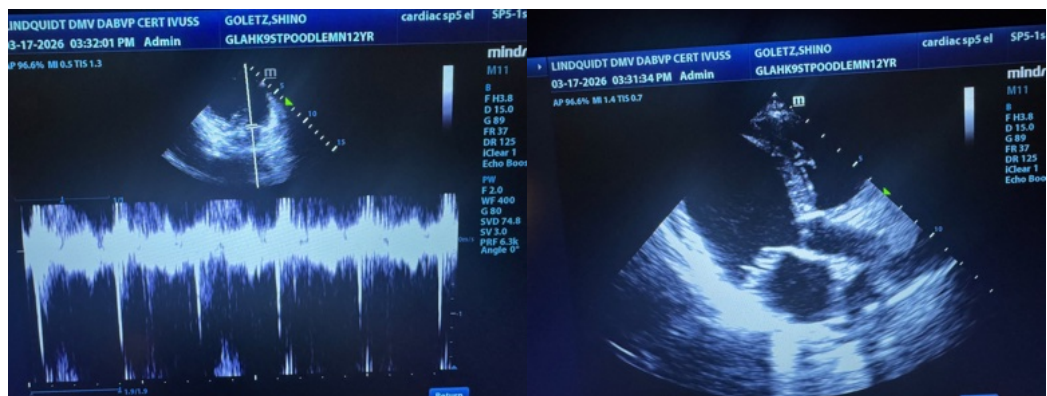
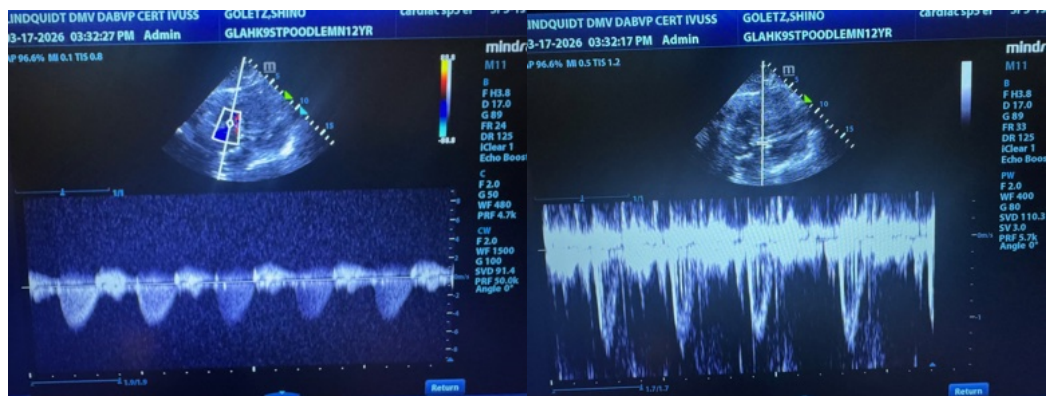
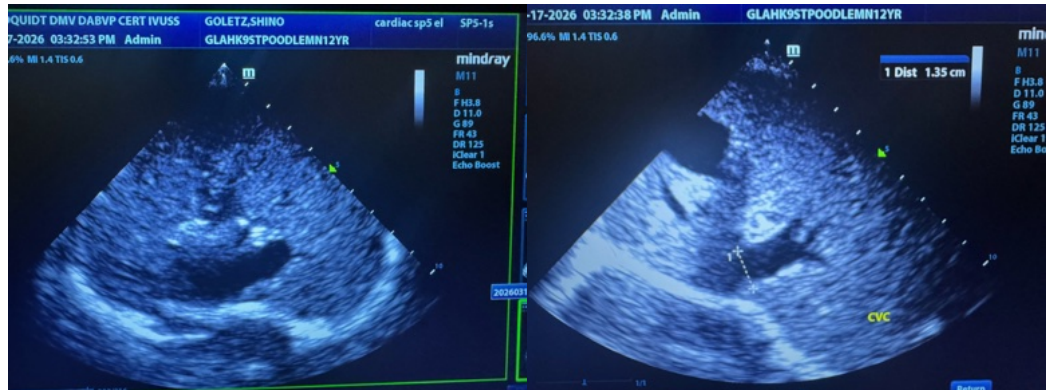
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The heart is in a somewhat precarious state with volume overload and a heart that is working to compensate for the valvular insufficiency. Target respiratory rate is < 20 resp/minute after therapy. After initiating therapy, I recommend recheck on the clinical exam, BUN, Creatinine, USG, Chest radiographs & Blood pressure in 5-7 days. Recheck echo in 1 month. Earlier if clinical decompensation is occurring. I do not recommend anesthesia at this time until stabilization has occurred on the recommended medications. Repeat preanesthetic echo is ideal if anesthesia is eventually necessary.





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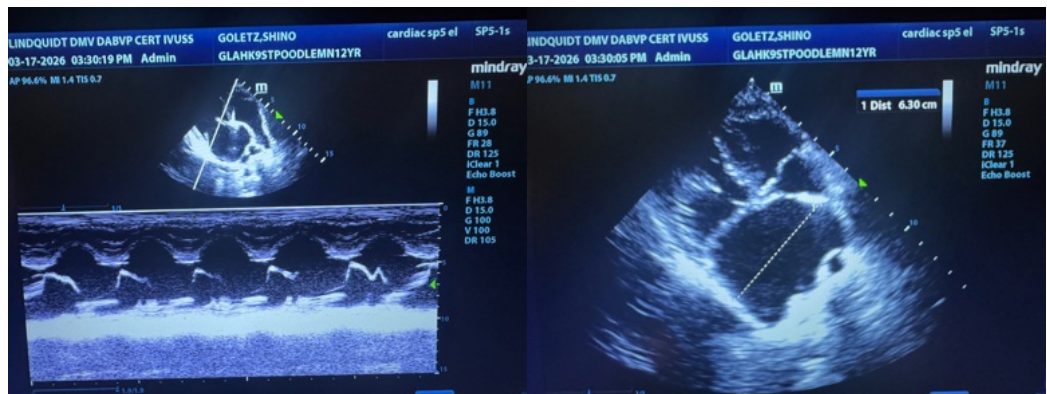
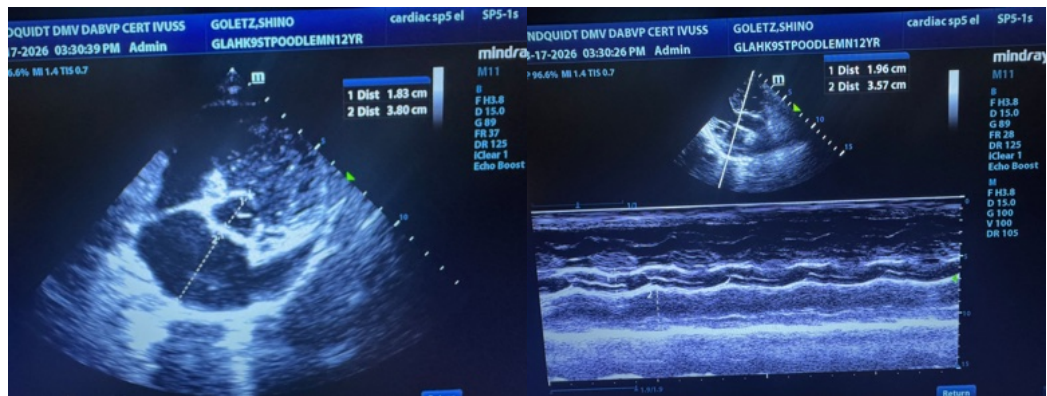
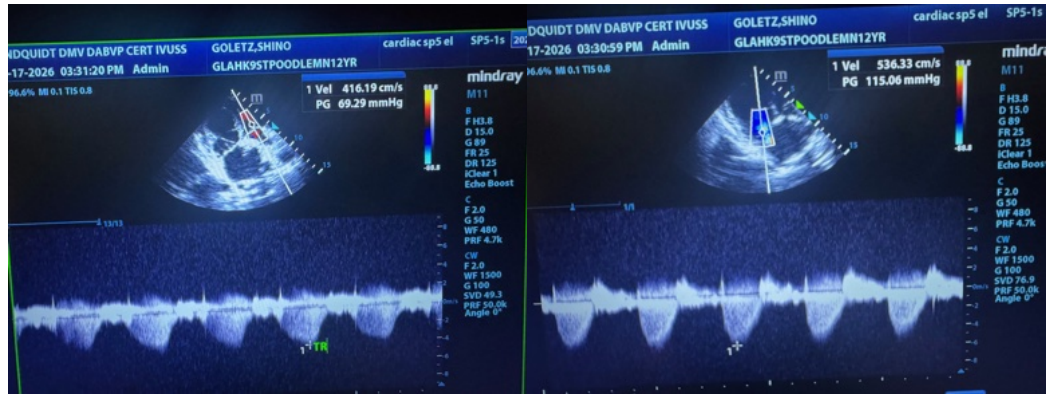
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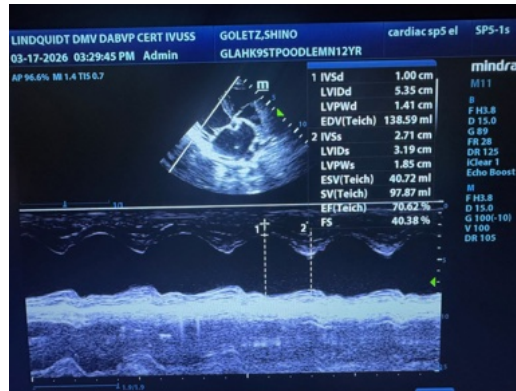
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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