PATIENT

Yogi Oates

SPECIES

Canine

BREED

Doberman

SEX

Male

AGE

2 months

WEIGHT

17.6 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kerri Becker

HOSPITAL NAME

Vetco Totowa

REFERRING VET

Dr. Tuttman

INVOICE

74307

DATE

4/8/26

PRESENTING CLINICAL SIGNS

Grade 3/6 L sided HM (apical) Unilateral cryptorchid (inguinal)

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate methods of LA evaluation. Trivial **mitral** valve insufficiency was noted in this patient. 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 presented mild excessive velocity measuring up to 2.8 m/sec. The **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted. Trivial **tricuspid** was noted. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **Pulmonary outflow** 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. The cranial **mediastinum and pericardial and extra-cardiac regions** were free of masses in the visible window. The **hepatic** veins were not dilated.

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	-	-	1.0	-	46	81	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	BELOW	BELOW	BELOW	BELOW
PATIENT	130	2.8	1.9	17.6 lbs	2.77	2.29	

ULTRASONOGRAPHIC FINDINGS

Mitral insufficiency with mild increased LVOT velocity. Minor form of mitral valve dysplasia is possible with compensatory increased LVOT velocity or a very minor form of subaortic stenosis. There are no significant structural changes noted in the aortic valve; however, elevated velocity is present.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

At this time there is no volume overload or pressure overload. I recommend assessing for any history of fever in this patient or endocarditis or empirical treatment for low-grade endocarditis can be

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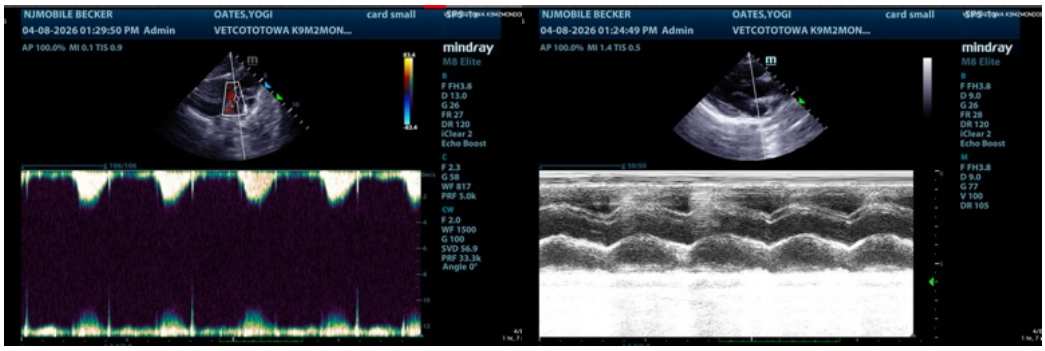
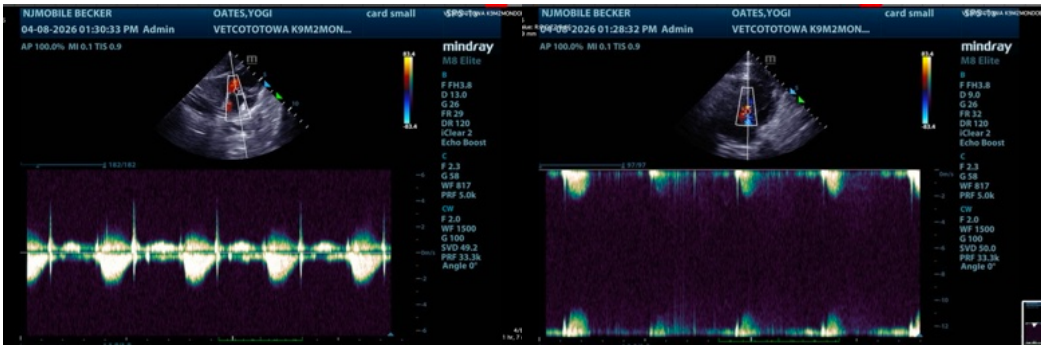
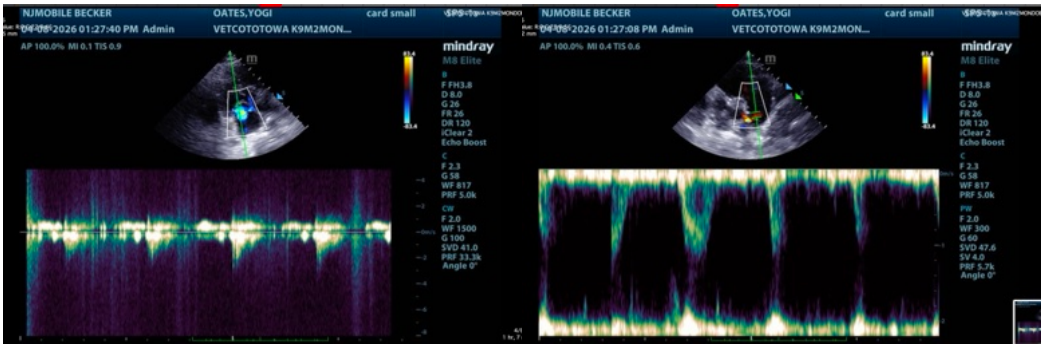
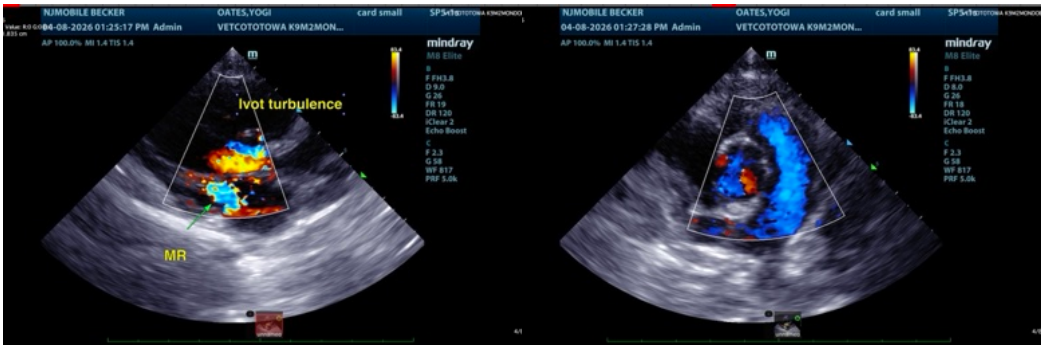
considered. This can be followed by a recheck echocardiogram in 3 months or earlier if any clinical signs initiate. However, I do not expect clinical signs at this time, yet this would be for further definition as the patient grows and a more definitive diagnosis can be achieved.









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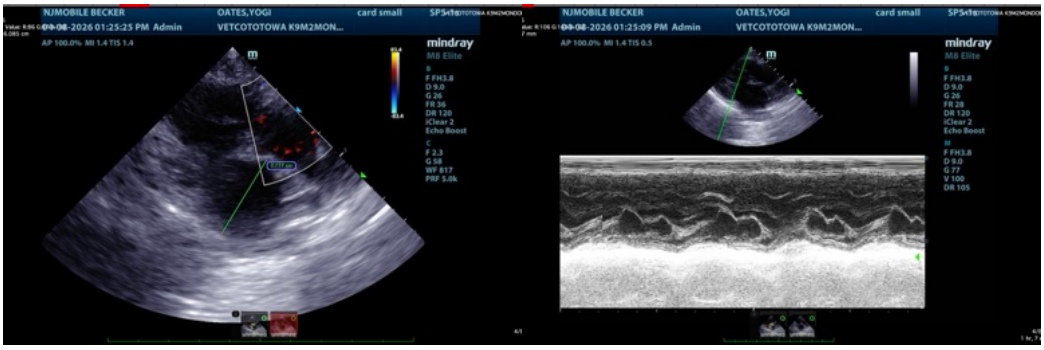

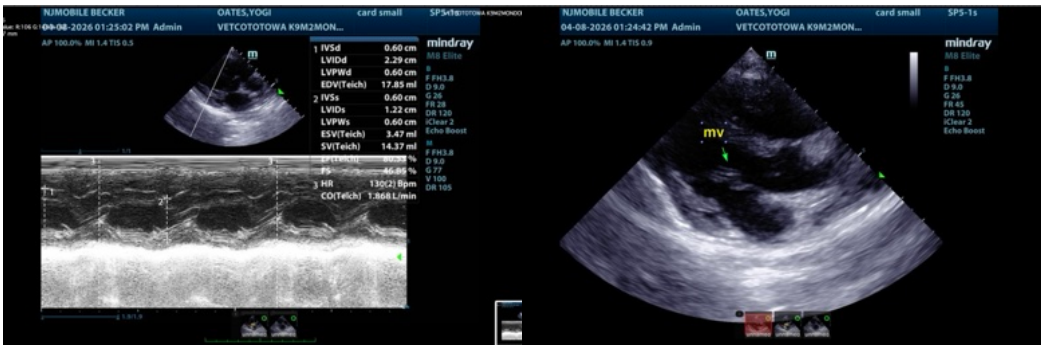

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 (CFM), Cert. IVUSS, CEO of SonoPath.com

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