



PATIENT PRESENTING CLINICAL SIGNS

Bea Kurczynsk

History: elevated CK, not on any meds. Owner has noticed some exercise intolerance

SPECIES BREED SEX AGE **ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

Canine

Greyhound

Spayed female

5 years

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate methods of LA evaluation. Trivial **mitral** valve turbulence was noted, yet is not clinically significant. The **left ventricle** presented normal 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 was structurally unremarkable, yet mild increased left ventricular outflow velocity was noted. This may be owing to hyperdynamic state or possible underlying systolic hypertension. The **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted. **Tricuspid** valvular assessment demonstrated adequate linear morphology and kinesis. 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). The cranial **mediastinum** and **pericardial and extra-cardiac regions** were free of masses in the visible window.

WEIGHT

62 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Diane McFadden, RVT

HOSPITAL NAME

Riverdale Integrated
VC

REFERRING VET

Dr. Kim

INVOICE

39898

DATE

10/4/22

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			1.2		41	71	0.7
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	155	2.4	1.6	65 lbs	4.9	4.89	



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ULTRASONOGRAPHIC FINDINGS

Trivial mitral turbulence and slightly increased LVOT.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no evidence of structural disease noted. Holter monitor can be considered given the history of exercise intolerance to assess for paroxysmal arrhythmia. However, there was no evidence of arrhythmogenic disease noted at the time of the sonogram. Blood pressure measurements +/- Holter monitor is indicated. However, other cause of exercise intolerance such as abdominal disease, orthopedic pain and extracardiac thoracic disease should also be considered as well as systemic hypertension.

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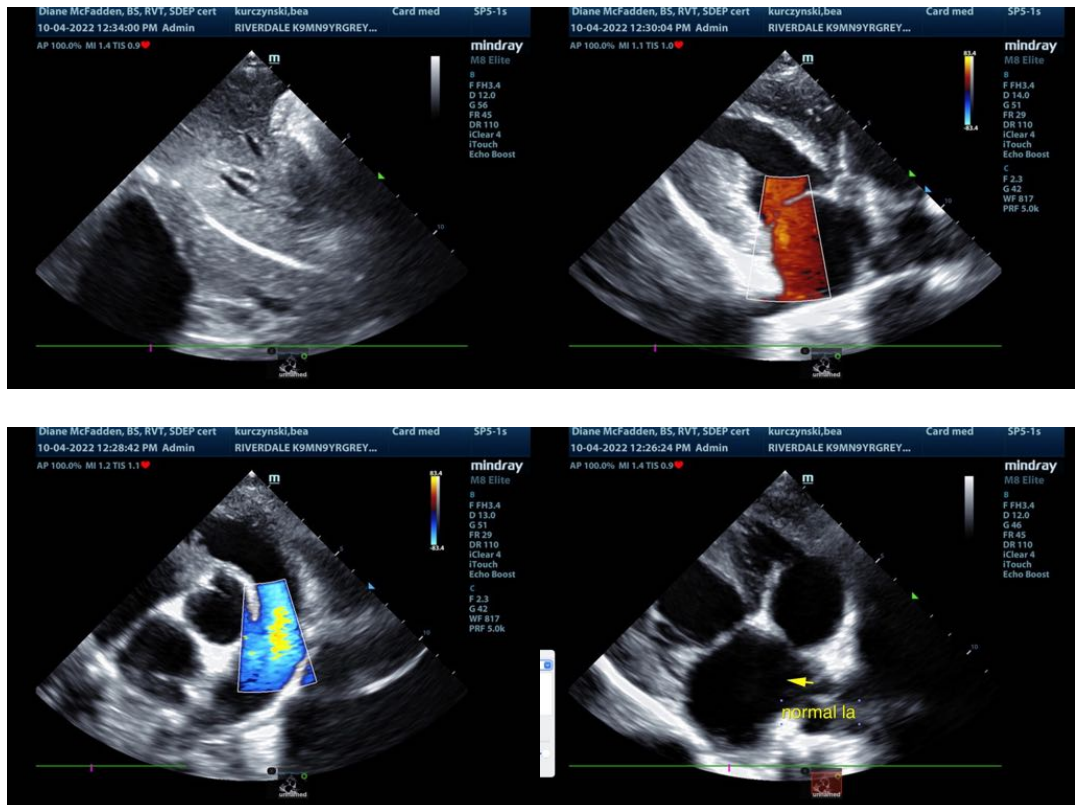
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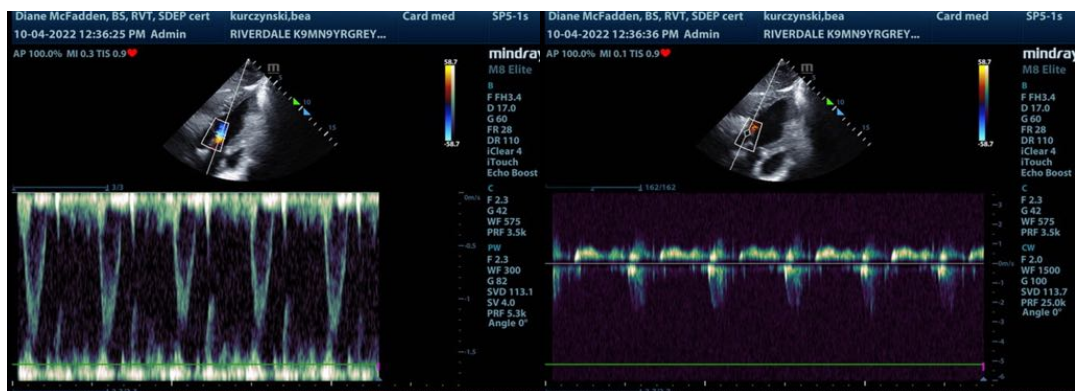
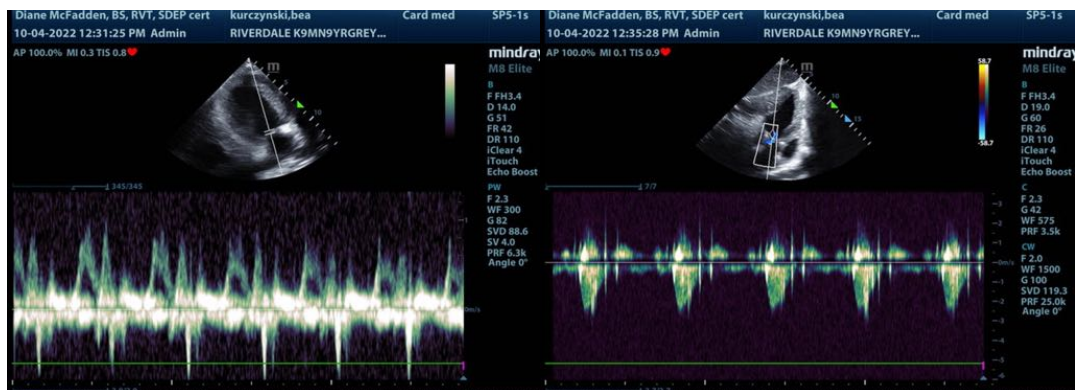
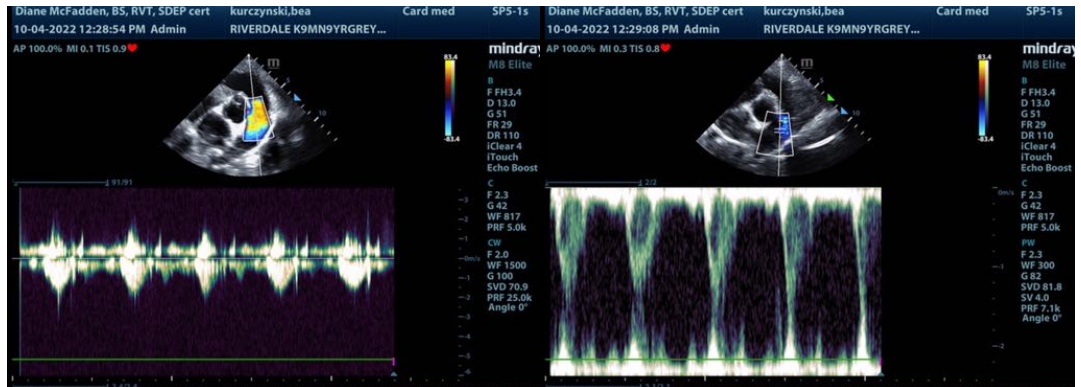
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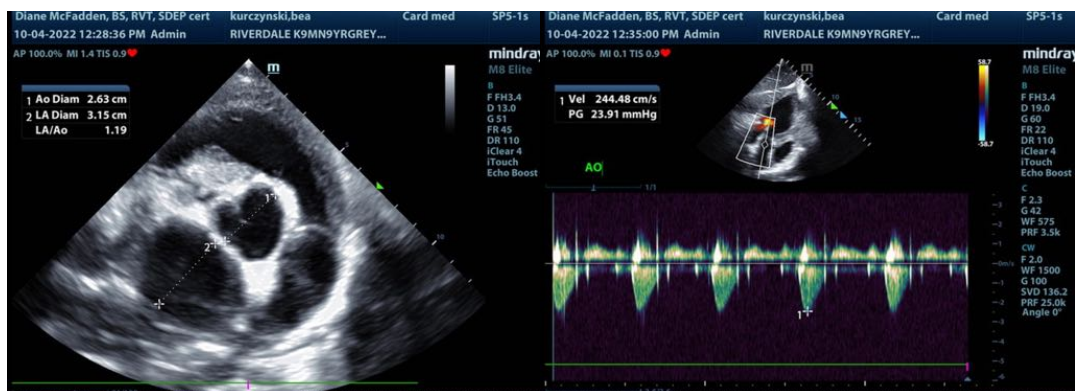
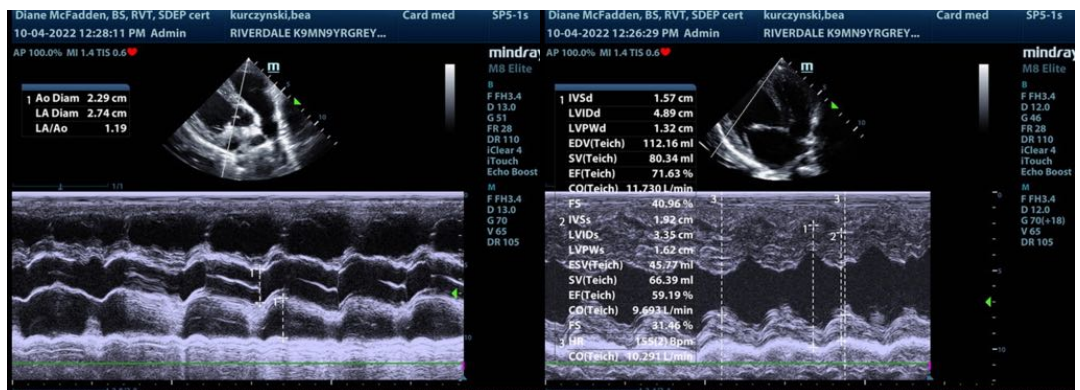
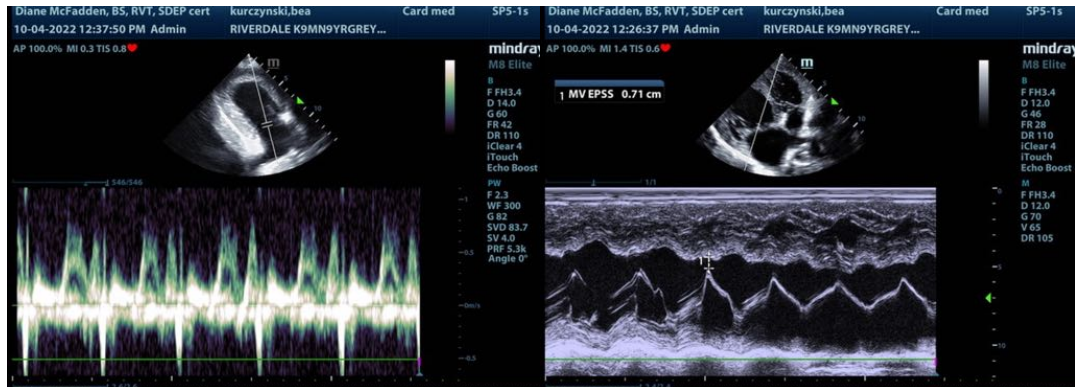
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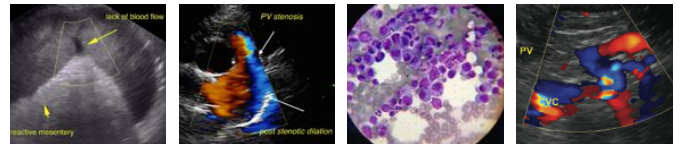
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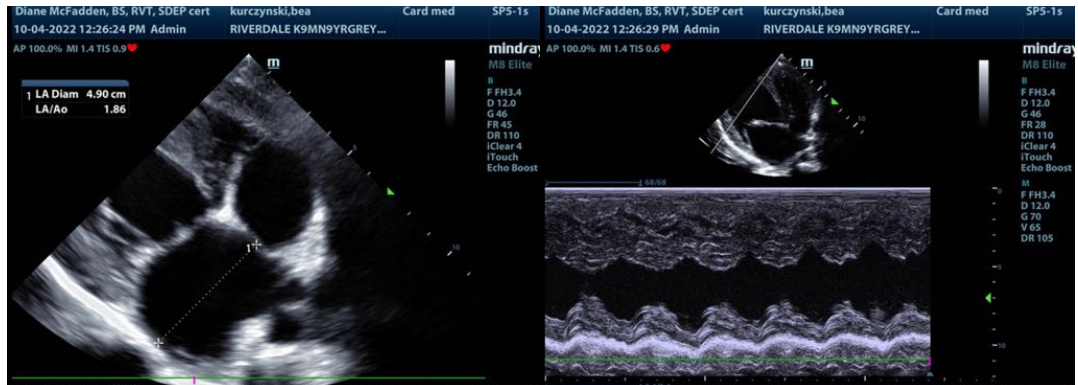
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
Info@SonoPath.com