



PATIENT

Chloe Stahman

SPECIES

Canine

BREED

Doberman Pinscher

SEX

Spayed female

AGE

6 ½ years

WEIGHT

93.8 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Vazquez, CVT

HOSPITAL NAME

Midland Park VH

REFERRING VET

Dr. Shokoff

PRESENTING CLINICAL SIGNS

History: Patient presents for follow up echo, her last one was on 11/4/2021. At that time a holter monitor was suggested, but owners did not pursue. No reported clinical issues. Current meds: Rimadyl, Thyroxine, Dasuquin, and Proin. Bloods NSF 8/2022.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate methods of LA evaluation. The cranial and caudal **mitral** valve leaflets presented normal linear structure, extension in systole, and union in diastole with normal kinesis. 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. **Aortic** velocity was excessive and insufficiency was noted. 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** insufficiency was noted and is moderate. 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.

| 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 | | | 0.3 | 1.2 | 27 | 53 | 0.45 |
| 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 | 83 | 2.45 | | 93.8 lbs | 3.14 | 3.75 | |

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ULTRASONOGRAPHIC FINDINGS

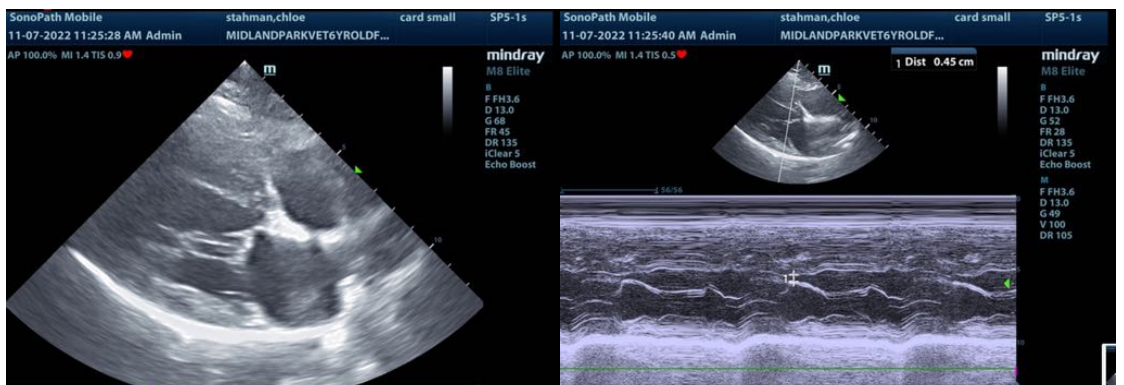
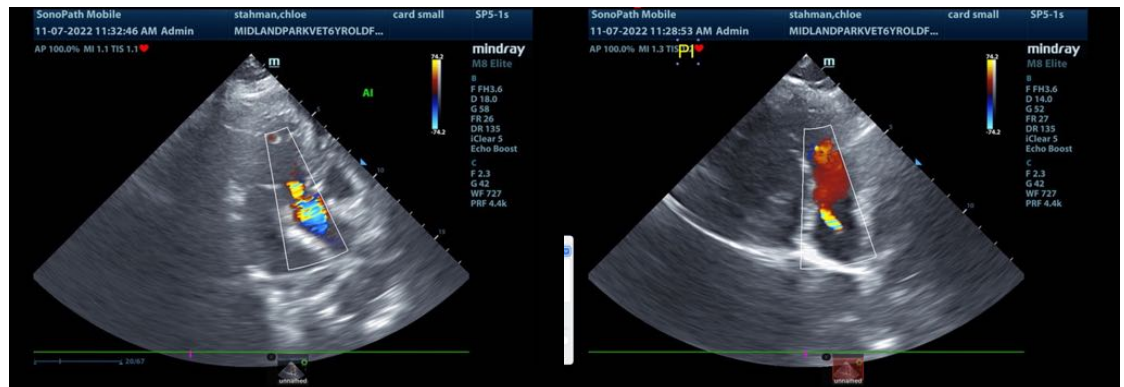
Mild idiopathic increased left ventricular outflow velocity. There is no structural evidence of aortic valve disease.

Secondary aortic insufficiency.

Minor pulmonic insufficiency.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is no evidence of DCM. The heart appears stable. Blood pressure measurements are recommended. No treatment is recommended at this time. There is no evidence of any progression from the prior echocardiogram; however, the aortic velocity has slightly increased. This may be owing to hyperdynamic state or excitement, yet not pathological.

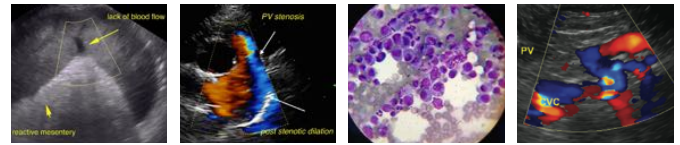


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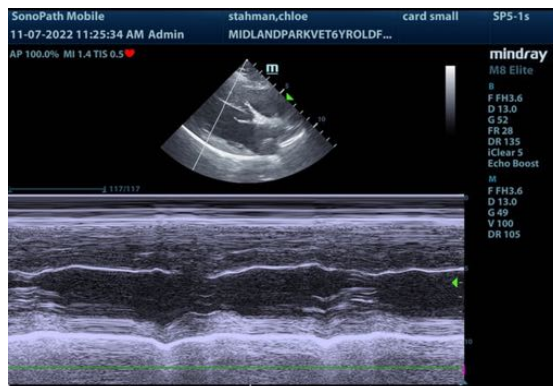
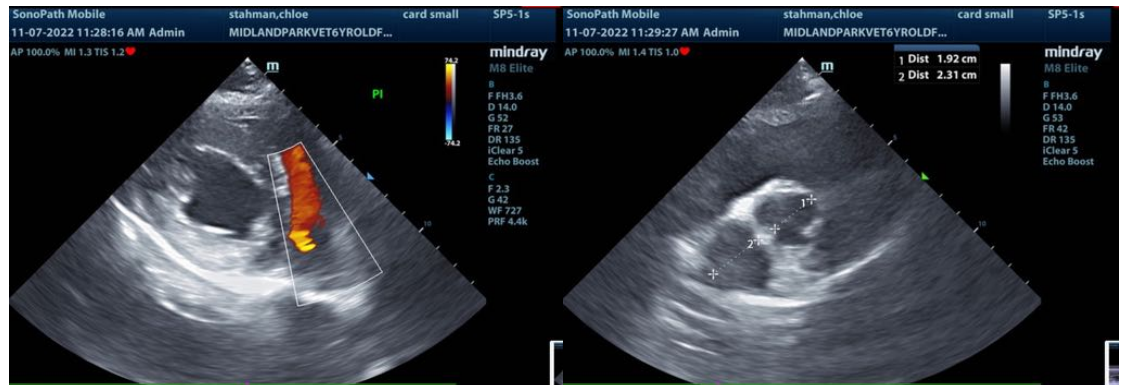
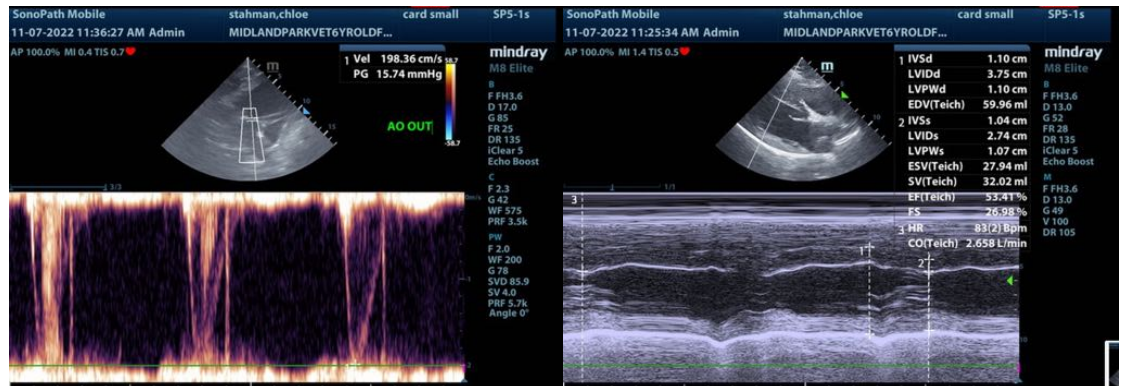
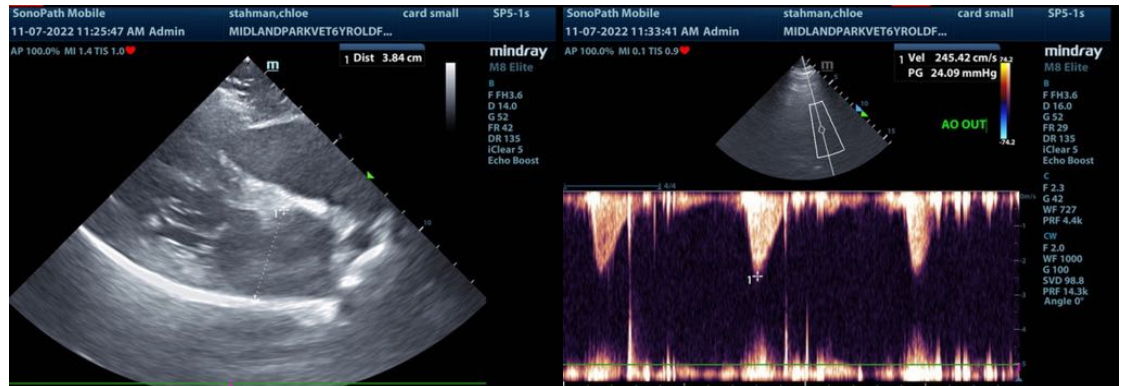
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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Info@SonoPath.com

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