

DATE PRESENTING CLINICAL SIGNS

11/10/25

History: Persistent grade 3 systolic heart murmur (has been there unchanged x 12 months), Pet needs dental with extraction. Checking for anesthesia risk and if cardiac meds needed. Current medication-- Meloxicam Oral Susp. 1..5mg/mL Give 0.25 mL by mouth once daily. SMZ/TMP Susp. (48mg/mL) Give 0.5mL by mouth twice daily for 30 days.

PATIENT

Jeremy Wisniewski

SPECIES

Rabbit

Abnormal PE/Chem/CBC/UA Results: Moderate leukocytosis with lymphocytosis, suspect secondary to tooth abscess. Minimal elevation to ALP and ALT

BREED

Lionhead

Imaging performed by: Stephanie Warga RDCS, RVT.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

SEX

Neutered Male

AGE

2/8/20

WEIGHT

3.41 Pounds

INTERPRETED BY

Laurent Locquet, DVM
MRCVS GPCert (VC)
Diplomate ECVIM-CA

RABBIT CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (M-Mode)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	Up to 1.6	28-40	40-100	<0.6
PATIENT	--	--	NM	1.22	35	68	NM
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LAD LA MAX 4 Chamber	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	--	0.54	1.93	--	1.10	1.46	0.95

HOSPITAL NAME

Warm & Fuzzy VC

REFERRING VET

Dr. Urie

INVOICE

35481

Cardiac Presentation

The left atrium was normal in all 3 views. The mitral valve was normal. The left ventricle was normal. The myocardium was normal. Contractility was normal. Left ventricular outflow tract was normal. The right atrium was normal. No evidence of masses. The tricuspid showed mild tricuspid valve regurgitation. The right ventricle was normal. There seems to be obstruction of the right ventricular outflow tract. No visible pericardial effusion or pleural effusion. The cranial mediastinum and pericardial regions were free of masses in the visible windows. What seems to be the liver, is subjectively leaning on the heart from time to time.

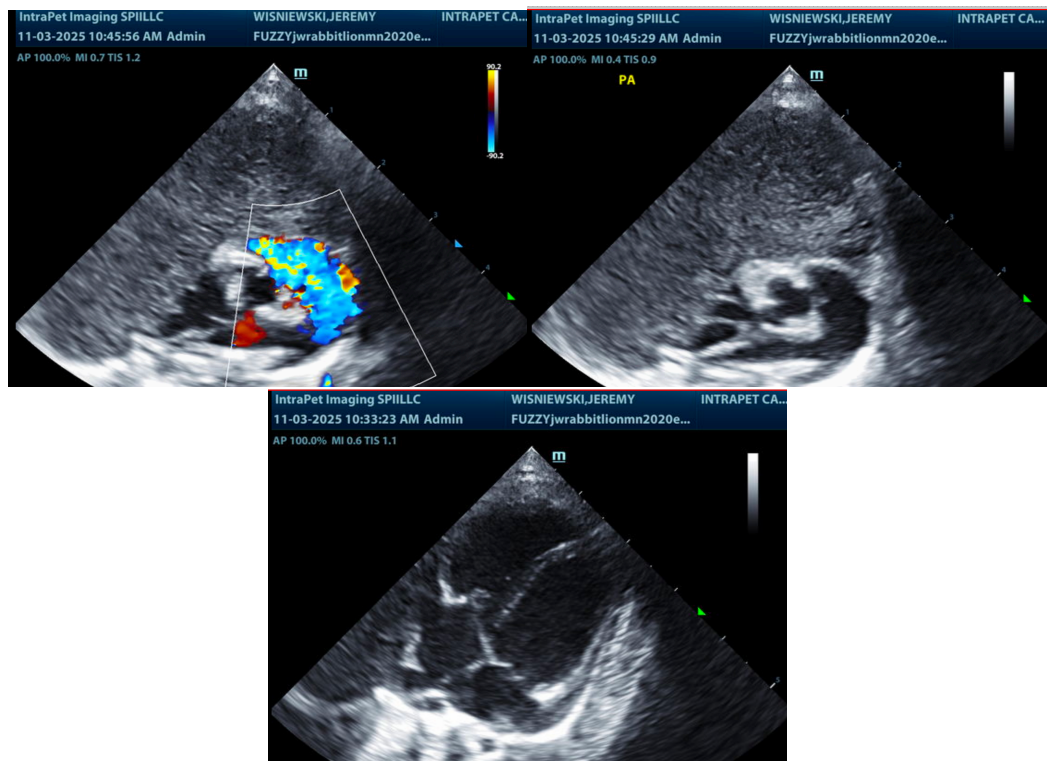
ULTRASONOGRAPHIC FINDINGS

- Subjective obstruction of the right ventricular outflow tract

- Liver is subjectively leaning on the heart

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Regarding the subjective leaning of the liver on the heart, I would recommend thoracic radiographs to make sure there are no abdominal organs in the chest or anything else that might be leaning on the heart before commenting on possible anesthetic risks.



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.

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