

PATIENT

Dofin London

PRESENTING CLINICAL SIGNS

right mid thoracic mass on rads- possibly of pulmonary origin. not on any meds.
Abnormal PE/Chem/CBC/UA Results: wnl

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

BREED

Mixed

SEX

MN

AGE

10 Years

WEIGHT

n/a

CANINE	MR	TR	LA/AO	LA/AO	FS	EF	EPSS
CARDIAC PARAMETERS	VMAX (m/s)	VMAX (m/s)	(Boon method)	(Heart Base; Swe)	(%)	(%)	(cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT		2.8	1.25	1.2	47.6	80.5	0.23
CANINE	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	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)
CARDIAC PARAMETERS							
NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6	BELOW	BELOW	BELOW	BELOW
PATIENT	150	1.9	1.4		3.0	2.88	

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

IMAGING PERFORMED BY

Diane McFadden

HOSPITAL NAME

Morris Hills VC

REFERRING VET

Dr. Hir

INVOICE

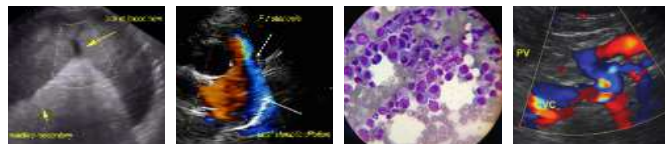
49710

DATE

1-21-22

Cardiac Presentation

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 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 demonstrated normal laminar flow and subjective structural integrity. 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. Mild TR present on Color Doppler. 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** fluid was noted. Solitary well demarcated to spherical pulmonary mass lesion present in the right thorax measuring approximately 5.0 cm in diameter. The pulmonary mass lesion was uniformly hypoechoic resulting in mild disruption of adjacent reflective lung. No evidence of concurrent pleural effusion.



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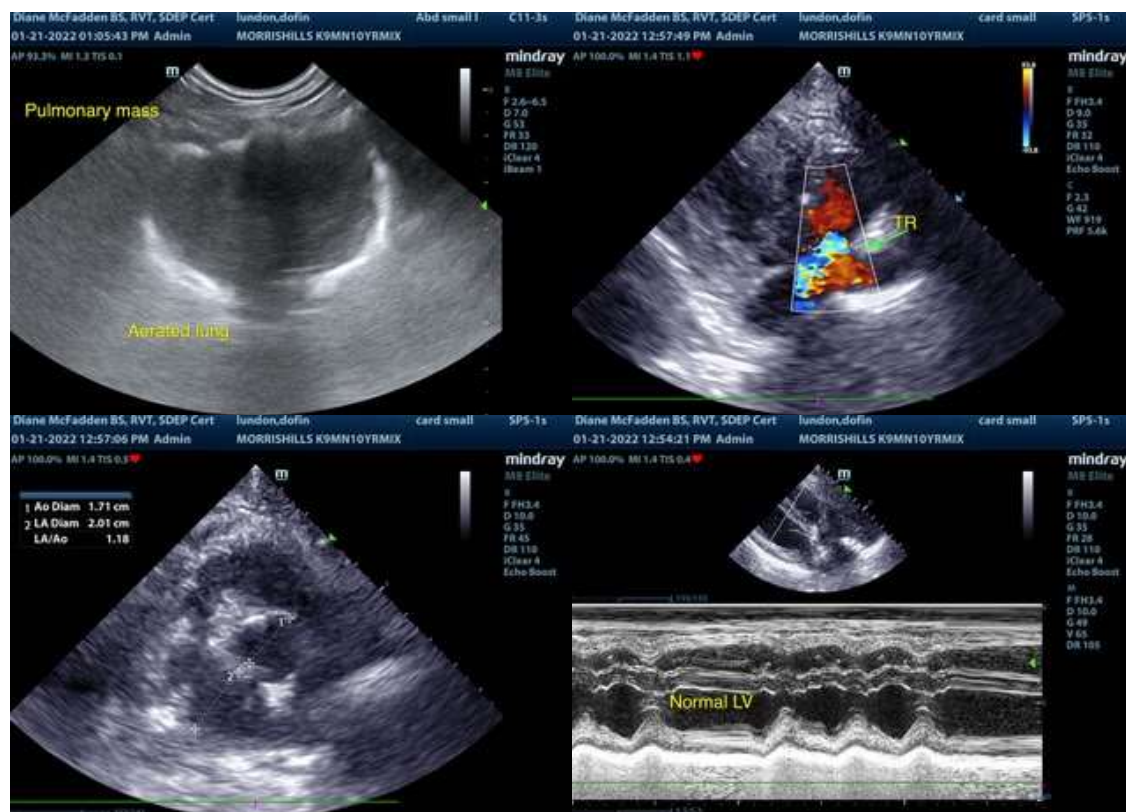
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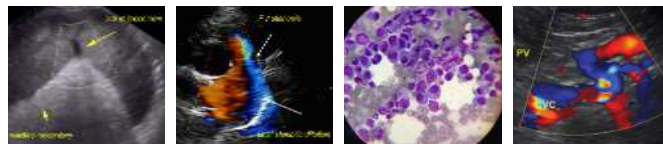
ULTRASONOGRAPHIC FINDINGS

- Normal echocardiogram
- Mild TR - estimated pulmonary pressure gradient not consistent with clinical pulmonary hypertension.
- Solitary pulmonary mass lesion.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The pulmonary mass lesion is nonspecific with considerations including neoplasia, consolidation, granuloma, or other. Neoplasia is favored although not definitive. Ultrasound guided FNA of the pulmonary mass lesion for screening cytology +/- culture and sensitivity if clinically indicated.





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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.

SPECIES

Canine

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.

BREED

Mixed

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

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