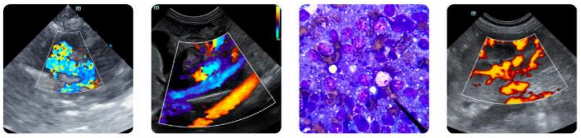


SonoPath www.SonoPath.com info@sonopath.com 800.838.4268

PATIENT

Buster Stannard

SPECIES

Canine

BREED

Chih/Corgi

SEX

MN

AGE

14y

WEIGHT

17 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Smithfield AH

REFERRING VET

Dr. Boe

INVOICE

10602

DATE

1/29/26

PRESENTING CLINICAL SIGNS

- grade 4 heart murmur
- previous SonoPath report from 6/2025 attached for reference
- current meds: Enalapril; Furosemide; Pimobendan ; (Torb/Midaz)

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

CANINE 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	5.5	~3.5	-	2.1	44	76	0.3
CANINE CARDIAC PARAMETERS	**HR** (BPM)	**AV VMAX** (m/s)	**PV MAX** (m/s)	**BODY WEIGHT** (lbs)	**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	144	1.0	0.6	17	4.5	3.4	-

Cardiac Presentation

The echocardiogram in this patient demonstrated moderate to severe increased **left atrial** dimension with deviated interatrial septum based on 2 LA measurement methods. The cranial and caudal **mitral** valve leaflets presented thickening consistent with endocardiosis with valvular prolapse. Doppler indicated measurable significant eccentric MR (MR velocity 5.5 m/s). The **left ventricle** presented increased dimension and sphericity. 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 or chamber overload. **Tricuspid** valvular assessment demonstrated thickening with valve prolapse and TV insufficiency on Doppler measuring ~3.5 m/s (estimate ~50 mm Hg). The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **Pulmonic** 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. No echographically detectable evidence of cardiac / pericardial tumors was visible. No evidence of arrhythmia was noted.

PATIENT

Buster Stannard

SPECIES

Canine

BREED

Chih/Corgi

SEX

MN

AGE

14y

WEIGHT

17 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Smithfield AH

REFERRING VET

Dr. Boe

INVOICE

10602

DATE

1/29/26

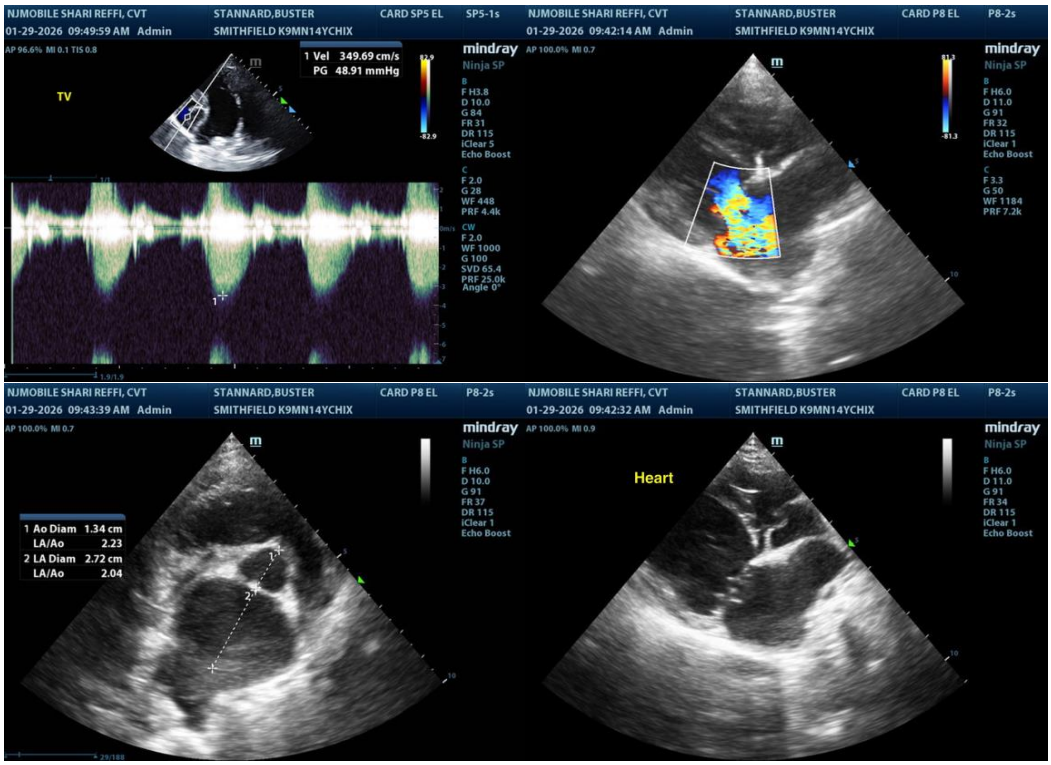
ULTRASONOGRAPHIC FINDINGS

- Chronic mitral valve disease with valvular prolapse (ACVIM B2+/C)
- Mild to moderate pulmonary hypertension

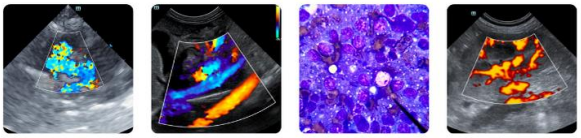
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Similar cardiac chamber dimension compared to the previous study without overt evidence of significant progression. Continued significant increased risk for complications secondary to MR in conjunction with mild to moderate pulmonary hypertension. If the patient is stable, continued current medication protocol is recommended. Serial monitoring of baseline resting respiration rate and exercise restriction are advised. If evidence of left-sided congestion, Furosemide / Spironolactone combination, both 1.0-2.0 mg/kg PO BID is suggested. Omega fatty acids supplementation and mild salt restriction may prove beneficial. Baseline monitoring of renal parameters, ECG, and systemic BP is recommended.

Prognosis remains highly guarded to variable with sonographic monitoring indicated. Recheck echocardiogram is suggested in 6 months, sooner if clinically indicated. Elective anesthesia is not advised.



New Jersey Mobile
FUELED BY SONOPATH VETERINARY ULTRASOUND



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™
www.SonoPath.com
info@sonopath.com 800.838.4268

PATIENT

Buster Stannard

SPECIES

Canine

BREED

Chih/Corgi

SEX

MN

AGE

14y

WEIGHT

17 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Smithfield AH

REFERRING VET

Dr. Boe

INVOICE

10602

DATE

1/29/26

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.

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