


**PATIENT PRESENTING CLINICAL SIGNS**

Franklin Antoszek

Was seen Friday for ADR. Was anorexic and straining to have a BM. This am finally passed a large and dry BM. PE unremarkable. Noted coughing. No heart murmur. On xray may have noted dorsal elevation of trachea and he had a "weird" episode when on his back for xrays.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: Please see attached radiographs. Bloodwork WNL other than M1 elevation in Alkphos.

**BREED**

Polish Sheepdog

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**
**SEX**

MN

**AGE**

7yr

**WEIGHT**

24.1kg

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	<1.3	28-40	40-100	<0.6
PATIENT				1.11.2	29.7	60.6	0.36
CANINE CARDIAC PARAMETERS	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)
NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6				
PATIENT	121	1.2	1.1		3.7	3.7	

**INTERPRETED BY**

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

**Cardiac Presentation**

The echocardiogram in this patient demonstrated normal left atrial size based on 2 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. No overt MR on Doppler. 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 mildly subnormal as 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. Normal LVOT velocity. 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. No overt TR on 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). Normal RVOT velocity. 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. No evidence of arrhythmia.

**IMAGING PERFORMED BY**

Crystal Hill

**HOSPITAL NAME**

Big Creek Vet Hospital

**REFERRING VET**

Dr. Wilkinson

**INVOICE**

11929ag

**DATE**

10/19/2022

**ULTRASONOGRAPHIC FINDINGS**

- Normal echocardiogram with mild LV hypocontractility-athletic state, systemic disease, hypothyroidism may present in this matter. DCM criteria was not met

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**



**PATIENT**

Franklin Antoszek

**SPECIES**

Canine

Overall, no evidence of overt structural cardiomyopathy with the only abnormality noted being mild LV hypocontractility which is of unclear significance and potential normal patient variant. No evidence of RA/RV enlargement or clinical pulmonary hypertension. The coughing in this patient is most likely non-cardiogenic in origin. No indication for cardiac medication. The possibility of emerging cardiomyopathy i.e. very early DCM criteria cannot be definitively excluded and sonographic monitoring is recommended for further assessment if clinically indicated. Recheck echocardiogram recommended in 4-6 months, sooner if clinical signs of heart disease arise.

**BREED**

Polish Sheepdog

**SEX**

MN

**AGE**

7yr

**WEIGHT**

24.1kg

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

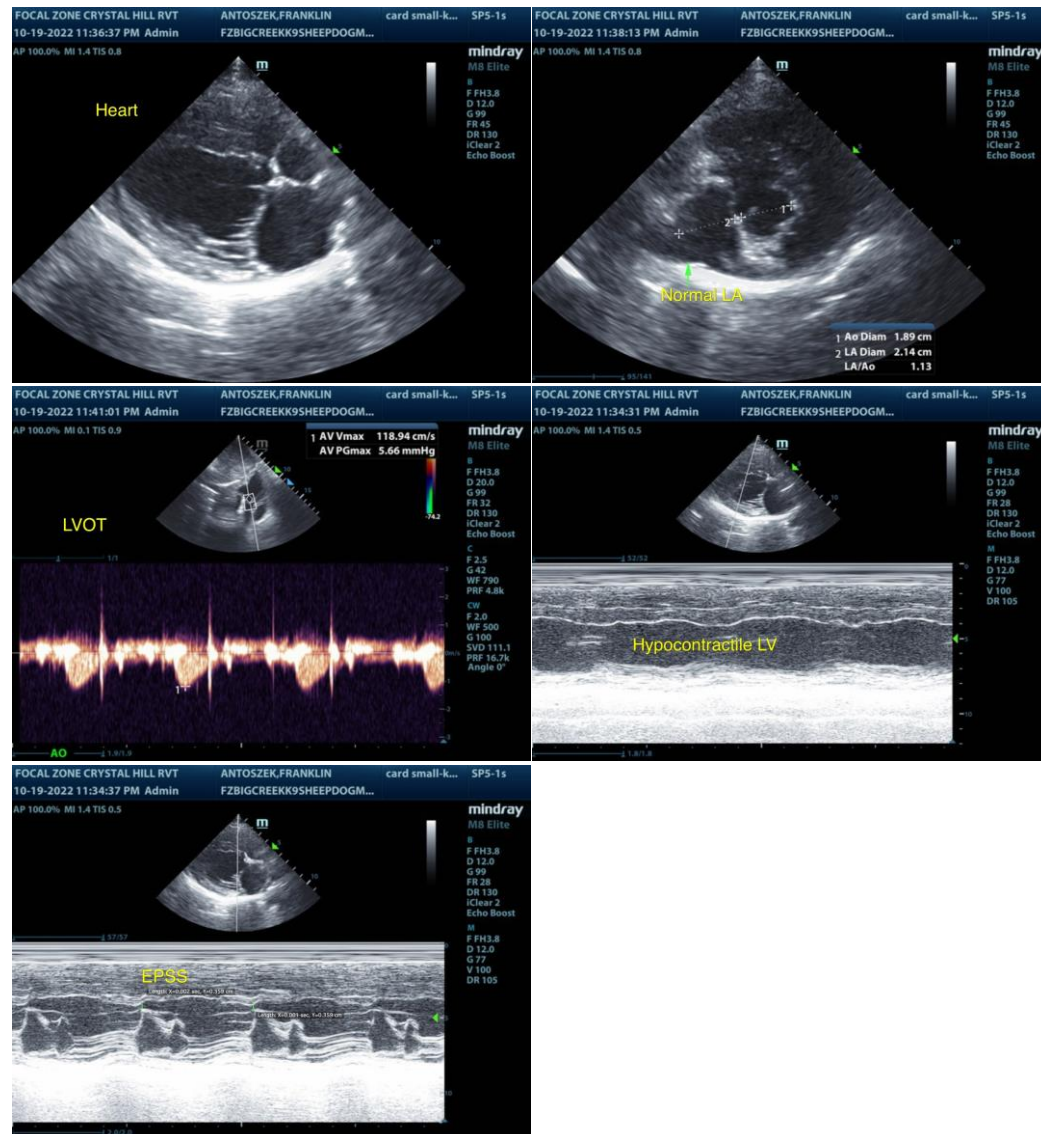
Crystal Hill

**HOSPITAL NAME**

Big Creek Vet Hospital

**REFERRING VET**

Dr. Wilkinson



**INVOICE**

11929ag

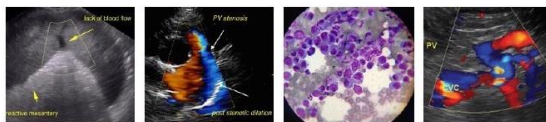
**DATE**

10/19/2022

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)



**PATIENT**

info@SonoPath.com

Franklin Antoszek

**SPECIES**

Canine

**BREED**

Polish Sheepdog

**SEX**

MN

**AGE**

7yr

**WEIGHT**

24.1kg

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Crystal Hill

**HOSPITAL NAME**

Big Creek Vet Hospital

**REFERRING VET**

Dr. Wilkinson

**INVOICE**

11929ag

**DATE**

10/19/2022