
PATIENT

Jake Parke

PRESENTING CLINICAL SIGNS

Patient presented with lethargy and severely distended abdomen. Ascites identified and abdominocentesis revealed pink-tinged fluid.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Tachycardia, no heart murmur, tachypneic. Large volume ascites.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART
BREED

Golden Retriever

SEX

MN

AGE

10yr

WEIGHT

49.4kg

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			1.4	1.1	45	80	0.2
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					4.5	3.7	

INTERPRETED BY

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

Cardiac Presentation

Moderate volume pericardial effusion with diastolic collapse of the right atrial wall consistent with cardiac tamponade was present. Hyperechoic to thickened right ventricle free wall in the area of the right atrioventricular groove was present. Suspect a non-homogeneous mass in the area of the right heart base measuring 2.8 cm in diameter. LV function was adequate. The left atrium was normal in diameter. Mild decreased LV volume owing to volume contraction was observed. Subjective normal pulmonic and aortic valves were present. Subjective normal mitral valve without overt MR was noted.

IMAGING PERFORMED BY

Dr. Barthelemy

ULTRASONOGRAPHIC FINDINGS

- Moderate volume pericardial effusion and secondary cardiac tamponade
- Thickened RV free wall and area of right AV groove, suspect mass in the area of the right heart base

HOSPITAL NAME

Sanctuary Vet
Hospital

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The cause of the ascites and distended is cardiac tamponade secondary to moderate volume pericardial effusion. This is likely secondary to cardiac neoplasia involving the right ventricular free wall, right AV groove and likely mass in the area of the heart base and right atrium. Given this presentation, hemangiosarcoma is considered probable. Emergency pericardiocentesis with fluid cytospin cytology is recommended. The overall prognosis is poor although oncology consult pending effusion analysis with potential for chemotherapy and/or radiation could be considered.

REFERRING VET

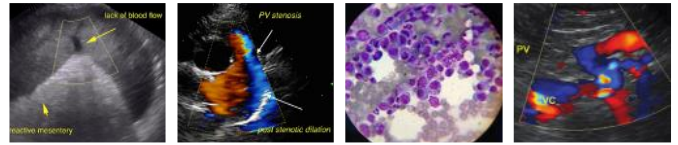
Sanctuary Vet
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INVOICE

12263ag

DATE

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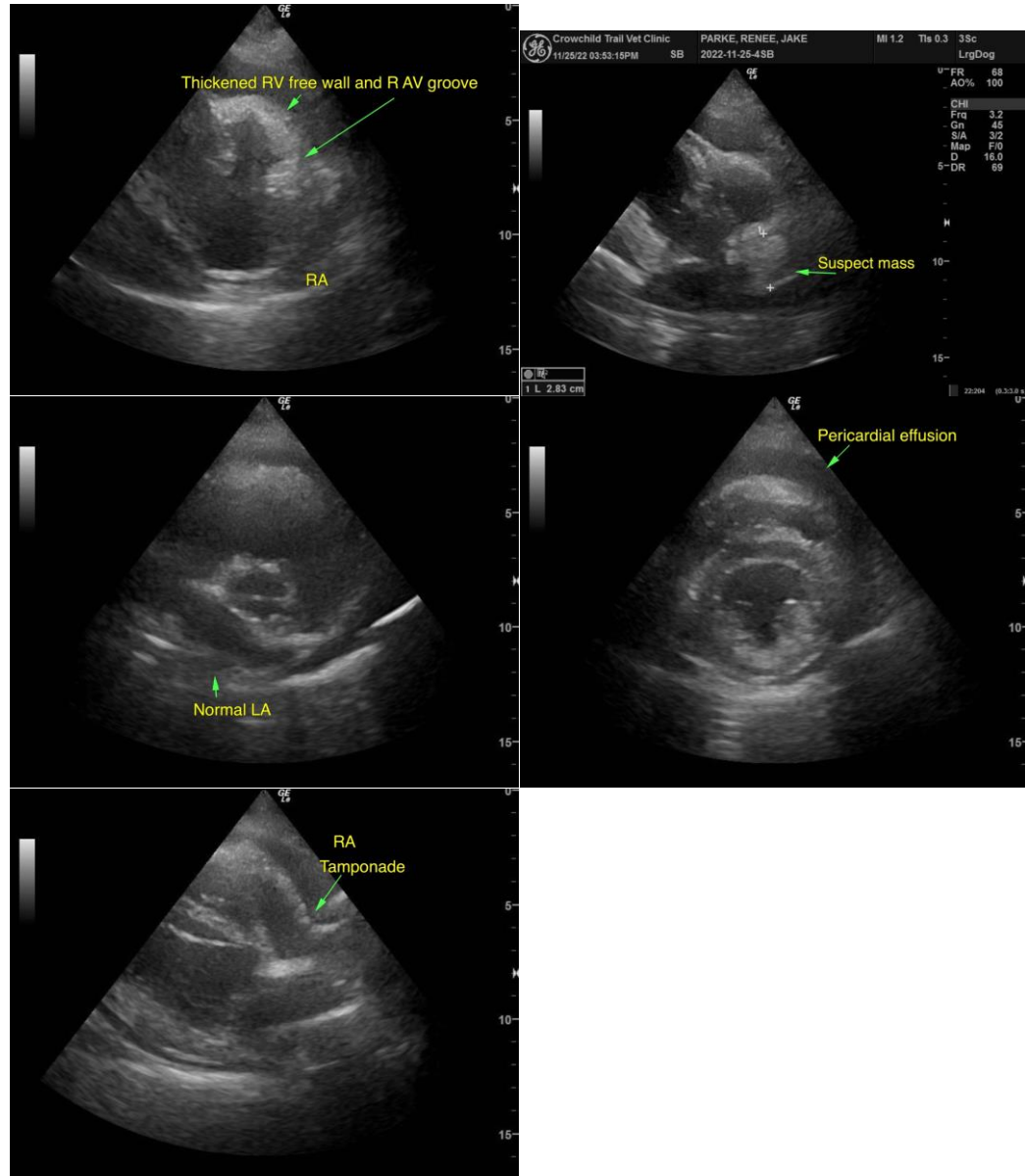
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
mac.daniel@sonopath.com