



PATIENT

Princess Fufu
Honigsberg

SPECIES

Canine

BREED

West Highland Terrier

SEX

Spayed Female

AGE

7 Years

WEIGHT

26.5 Pounds

PRESENTING CLINICAL SIGNS

History: 2/6 left apical systolic murmur, non clinical. On apoquel and rimadyl
Abnormal PE/Chem/CBC/UA Results: wnl

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

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	--	--	NM	1.5	42	75	0.15
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	139	2.3	1.5	--	2.9	2.9	--

INTERPRETED BY

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

IMAGING PERFORMED BY

Diane McFadden

HOSPITAL NAME

Blairstown AH

REFERRING VET

Dr. Lovell

INVOICE

18896

DATE

11/30/22

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 subtle thickening with normal extension in systole, and union in diastole with normal kinesis. No overt or significant 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 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 systolic laminar flow and subjective structural integrity and normal appearance to the AV valve. Mild increased measured 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 measured 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.

ULTRASONOGRAPHIC FINDINGS

- Normal echocardiogram
- Mild increased LVOT velocity



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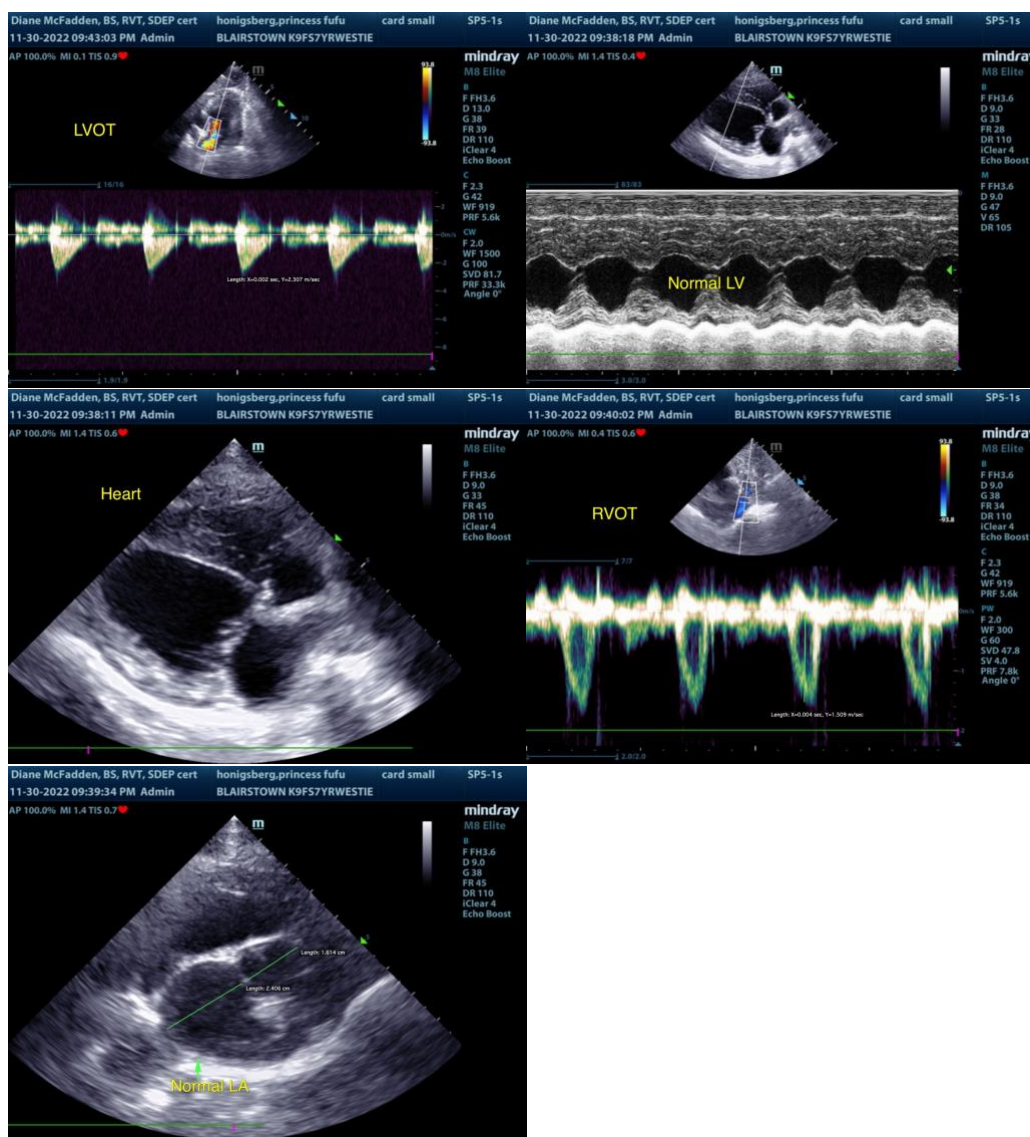
DATE

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of structural or functional cardiomyopathy without a definitive cause of the low grade murmur identified. Potentially, the low-grade murmur may be secondary to mild increased LVOT velocity, which is essentially a physiologic/flow murmur and not consistent with stenotic disease. Likewise, the possibility of minor MR could be present. Regardless, the hemodynamic effects of the low-grade murmur appear to be clinically insignificant without evidence of left or right heart chamber enlargement, myocardial remodeling, LV systolic dysfunction or evidence of clinical pulmonary hypertension.

Conservative monitoring at this stage is recommended with recheck echocardiogram suggested in 6-12 months or sooner if murmur intensity increases or unlikely clinical signs suggestive of cardiac disease arise. No anesthetic contraindications if anesthesia is required.



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



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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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info@SonoPath.com

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