



**PATIENT**

Luna Woodhouse

**SPECIES**

Canine

**BREED**

Mixed

**SEX**

Female (spayed)

**AGE**

10 years

**WEIGHT**

71 lbs.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**  
Meghan Morse, LVT,  
CVT

**HOSPITAL NAME**

Long Valley AH

**REFERRING VET**

Dr. Earl

**INVOICE**

10286

**DATE**

11/4/25

**PRESENTING CLINICAL SIGNS**

Pre anesthesia echo. (prior ecg showed a supra ventricular arrhythmia). No auscultatable murmur.  
Current meds: Carprofen 50mg BID

Abnormal PE/Chem/CBC/UA Results: Anaplasma + (chronic)

**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				1.3	35	66	0.2
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LAD LA MAX4 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	NM	1.0	0.84		3.5	3.2	

**Cardiac Presentation**

The echocardiogram in this patient demonstrated normal **left atrial** size and structure. Chamber volume and blood echogenicity were normal. The cranial and caudal **mitral valve** leaflets presented minor irregular age-related changes that are not clinically significant at this time with adequate extension in systole and union in diastole. No evidence of MR on Doppler. The **left ventricle** presented normal free wall and septal thicknesses with linear contour. The **myocardium** presented some echogenic remodeling consistent with expected age-related change. **Contractility** of the ventricular walls was adequate and in normal range for this breed and patient size. The **left ventricular outflow** tract demonstrated normal laminar flow with subjectively unremarkable structure. Subjective assessment of the **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted. **Tricuspid** valvular assessment demonstrated expected findings for this age patient. No evidence of TR on Doppler. The **right ventricle** was of normal size (1/3 diameter of LV), 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 pleural fluid was noted. The **mediastinum** was free of masses in the visible window. No obvious arrhythmia.

**ULTRASONOGRAPHIC FINDINGS**

- Normal cardiac structure / function with mild myocardial remodeling



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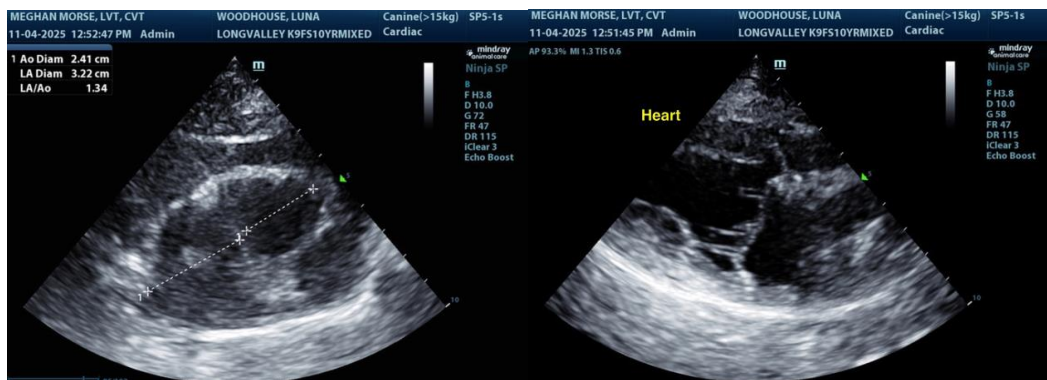
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

There is no evidence of clinical issues such as left or right heart chamber enlargement, LV systolic dysfunction, significant valvular insufficiency or current arrhythmia. There is no indication for cardiac medications. From a cardiac structural/ functional standpoint, anesthetic risk is considered mild. Recheck echocardiogram is suggested in 6- 12 months, sooner if clinically indicated.

Suggested anesthetic protocol may include opioid or Benzodiazepine pre-med, induction with Propofol or Alfaxalone, and appropriate gas anesthesia with avoidance of alpha 2 agonists.



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.

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