

**PATIENT**

Cimmaron Washburn

**SPECIES**

Canine

**BREED**

German Shepherd

**SEX**

MN

**AGE**

12 yrs

**WEIGHT**

84 lbs.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Harold Mike Beard

**HOSPITAL NAME**

Animal Care Veterinary Center

**REFERRING VET**

Dr. Maghee

**INVOICE**

10296

**DATE**

11/5/25

**PRESENTING CLINICAL SIGNS**

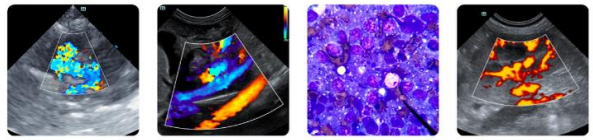
No abnormalities, presented for routine yearly wellness. RDVM found arrhythmia VPCs.  
Abnormal PE/Chem/CBC/UA Results: Arrhythmia noted by RDVM during yearly wellness exam.

**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				1.12	35	68	0.3
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	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	NM	NM	NM		4.2	4.0	

**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. The **left ventricle** presented 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 subjective normal laminar flow and subjective structural integrity. 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. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **Pulmonary outflow** tract assessment revealed subjective normal valvular structure, laminar flow, and diameter. 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. Nonspecific arrhythmia was noted.



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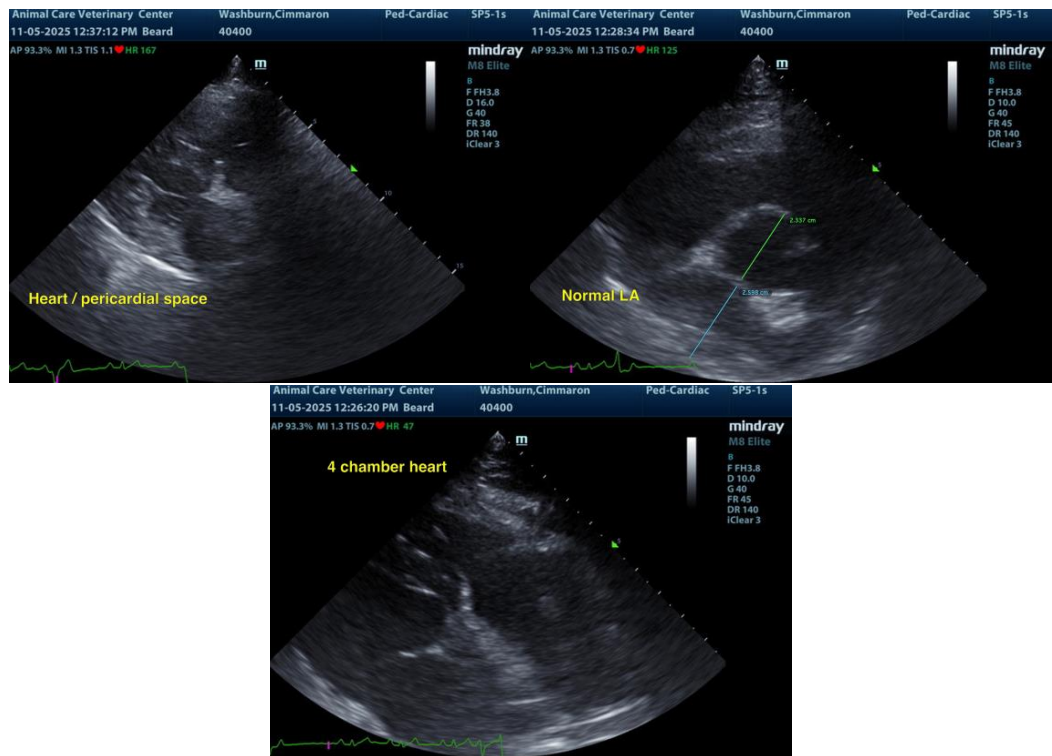
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## ULTRASONOGRAPHIC FINDINGS

- Normal cardiac structure with adequate LV systolic function
- Nonspecific arrhythmia

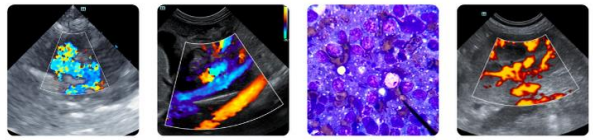
## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is no evidence of clinical issues such as left or right heart chamber enlargement, LV systolic dysfunction, or pericardial disease as a contributing factor to the arrhythmia. Correlation with ECG with potential cardiac consult and consideration for abdominal ultrasound to assess for pathology as a potential contributing factor to the arrhythmia.



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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**R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)**

[info@sonopath.com](mailto:info@sonopath.com)

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