


PATIENT

Brodie Ferreira

PRESENTING CLINICAL SIGNS

pale MM, coughing, lethargic, concern for possible heart mass

SPECIES

Canine

BREED

B. Collie

SEX

FS

AGE

14 years

WEIGHT

25 kg

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	<1.6	28-40	40-100	<0.6
PATIENT	4.5	<2.0	NM	1.46	35.8	66.4	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	BELOW	BELOW	BELOW	BELOW
PATIENT	116	1.5	1.1		3.9	3.6	

INTERPRETED BY

 R. McKenzie Daniel,
 DVM, DABVP

**IMAGING
PERFORMED BY**

Kelly Reshny, RVT

HOSPITAL NAME

Downtown AH

REFERRING VET

Dr. Ahn

INVOICE

12837

DATE

12/17/21

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 normal linear structure, extension in systole, and union in diastole with normal kinesis. Color doppler assessment revealed mild mitral valve insufficiency. The **left ventricle** presented thicknesses with linear contour and was not dilated nor restricted. The overall **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 laminar flow and subjective structural integrity. The **right atrium** and auricle revealed overall normal size, structure and content. A nonhomogeneous, well-demarcated lesion associated with the likely right auricle, measuring 2.5 cm in diameter, was present. Diastolic collapse of the right atrial free wall was present, consistent with cardiac tamponade. **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 normal valve structure, laminar flow, and diameter (approx. 1:1 pa/ao ratio). Moderate to marked pericardial effusion was present. Concurrent cranial **mediastinum, pericardial or extra-cardiac** masses were not evident in the visible window.



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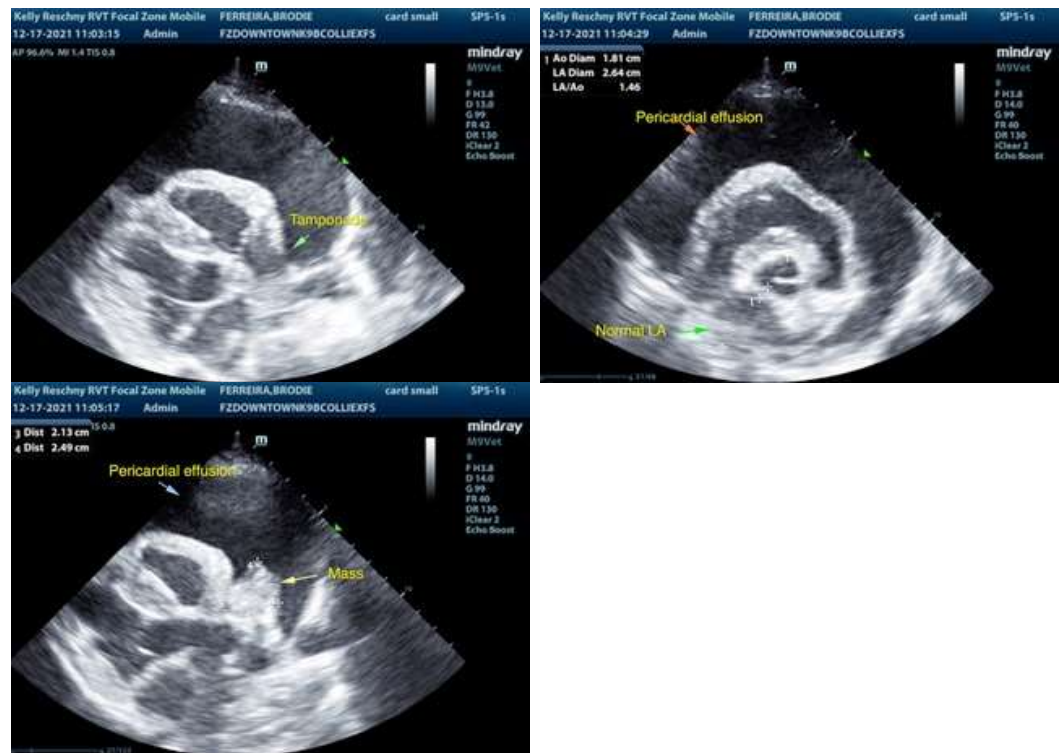
ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Heart base (right auricle) mass
- Moderate to marked pericardial free fluid with secondary cardiac tamponade

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most likely tumor type, given this location, is hemangiosarcoma. Other tumor types are possible yet considered less likely. Regardless, the patient is in cardiac tamponade secondary to pericardial effusion, which suggests effusion secondary to the tumor. Therapeutic and diagnostic pericardiocentesis could be considered with cytology of the pericardial fluid. Surgical, chemotherapeutic, or radiation options could be discussed with an oncologist. However, the prognosis with probable cardiac hemangiosarcoma is unfavorable.



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.

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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