



**PATIENT PRESENTING CLINICAL SIGNS**

Sadie Bose Recheck echo. Heart murmur is noted as a grade 5/6. Sadie is increasingly getting less active and sleeps more than normal. No coughing.  
 Abnormal PE/Chem/CBC/UA Results: BW reveals elevated liver enzymes and cholesterol.

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

BREED	CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
Cavalier King Charles								
SEX	NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
Spayed Female	PATIENT	5.7	2.2	1.74	1.87	39.2	73	0.11
AGE	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)
10 Years								
WEIGHT	NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6				
22.4 Pounds	PATIENT	133	1.9	0.8		4.1	3.7	

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Kim Liedberg

**HOSPITAL NAME**

SVS Imaging WI

**REFERRING VET**

Dr. Kevin Kreier, Badger VH

**INVOICE**

33711

**DATE**

12/23/21

**Cardiac Presentation**

The echocardiogram for this patient presented moderately excessive **left atrial size** expressed both in the LA/AO and LA max measurements. The cranial and caudal **mitral valve** leaflets presented vegetative thickening consistent with myxomatous mitral valve changes with previously noted prolapse of the septal leaflet. Doppler indicated measurable insufficiency. The **left ventricle** presented normal thicknesses with increased left ventricular volume. 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 laminar flow and subjective structural integrity. The **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted or chamber overload. **Tricuspid** valvular assessment demonstrated adequate linear morphology. Mild tricuspid valve insufficiency present on color doppler. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial 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 pleura fluid was noted. No echographically detectable evidence of infiltrative disease was visible. The cranial **mediastinum and pericardial regions** were free of masses in the visible window.

**ULTRASONOGRAPHIC FINDINGS**

- Chronic mitral valve disease with mild valvular prolapse (ACVIM B2)
- Mild TV insufficiency – estimated pulmonary pressure gradient not consistent with clinical pulmonary hypertension.



**PATIENT**

Sadie Bose

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**BREED**

Cavalier King Charles

**SEX**

Spayed Female

**AGE**

10 Years

**WEIGHT**

22.4 Pounds

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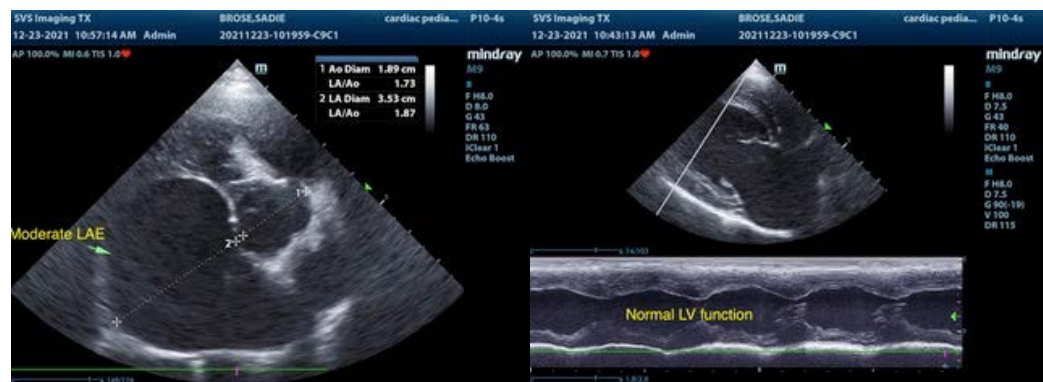
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Essential static cardiac presentation based on measurements compared to the previous echocardiogram. The moderate left atrial enlargement continues to indicate that the risk for complication is elevated. No other clinical issues such as systolic dysfunction or evidence of clinical pulmonary hypertension noted. Continued Pimobendan at 0.3 mg/kg PO BID recommended, while a low dose diuretic such as Spironolactone at 1-2 mg/kg PO SID to BID may be considered at this stage. Monitoring of resting respiration rate recommended. Recheck echocardiogram suggested in 6 months, sooner if clinical signs associated with left heart disease (i.e., coughing, increased resting respiration rate, exercise intolerance, etc.) are noted.





**PATIENT**

Sadie Bose

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.

**SPECIES**

Canine

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.

**BREED**

Cavalier King Charles

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**SEX**

Spayed Female

**AGE**

10 Years

**WEIGHT**

22.4 Pounds

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