



PATIENT

Dijorno Everson

SPECIES

Canine

BREED

Jack Russell

SEX

Neutered Male

AGE

12 Years

WEIGHT

11.3 Lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Kim Liedberg

HOSPITAL NAME

SVS Imaging WI

REFERRING VET

Dr. Miller, Creature
Comfort VS

INVOICE

13939

DATE

2/14/22

PRESENTING CLINICAL SIGNS

History: Adopted 1 year ago. He was neutered 2 weeks ago and had a mast cell tumor on his scrotum. He has a hx of dental dx, arthritis and a heart murmur. Previous echocardiogram performed 6/21/21 revealed compensated mitral valve disease (B-1).

Abnormal PE/Chem/CBC/UA Results: elevated liver values noted on presurgical BW

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	--	--	NM	1.36	51	84	0.25
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	140	1.1	0.8	--	2.8	2.7	--

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 different LA measurement methods. Chamber volumes and echogenicity were normal. The cranial and caudal **mitral** valve leaflets presented vegetative thickening consistent with endocardiosis. No evidence of valvular prolapse or chordae tendineae rupture. Doppler indicated mild primarily eccentric insufficiency. 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 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 mild thickening with trace TR. 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



PATIENT

- Continued compensated chronic mitral valve disease (ACVIM B-1)

Dijorno Everson

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

The cardiac presentation continues to indicate compensated chronic mitral valve disease. The lack of left atrium enlargement continues to indicate that the relative risk for complication is low. No other clinical issues such as systolic dysfunction or overt clinical pulmonary hypertension were noted. Mild evidence of age-related LV myocardial remodeling present, which is expected. In a nonclinical patient without evidence of chamber enlargement, cardiac medications are not specifically indicated.

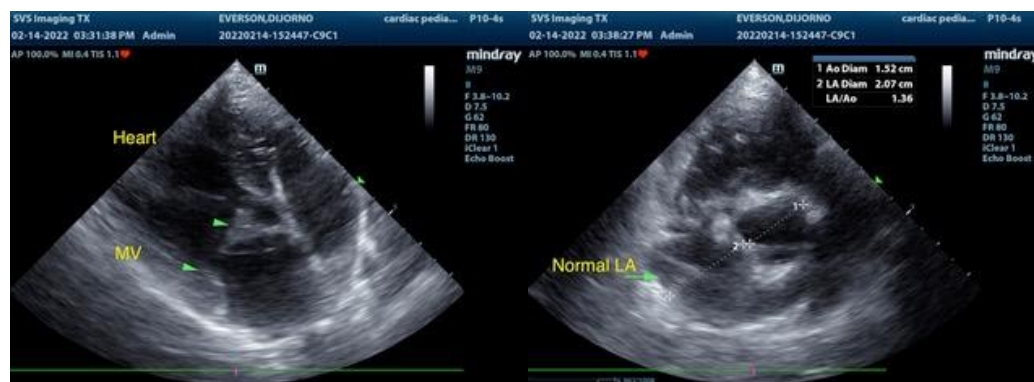
Canine

BREED

Continued conservative monitoring at this stage would be appropriate. Recheck echocardiogram suggested in 6 months or sooner if clinical signs arise.

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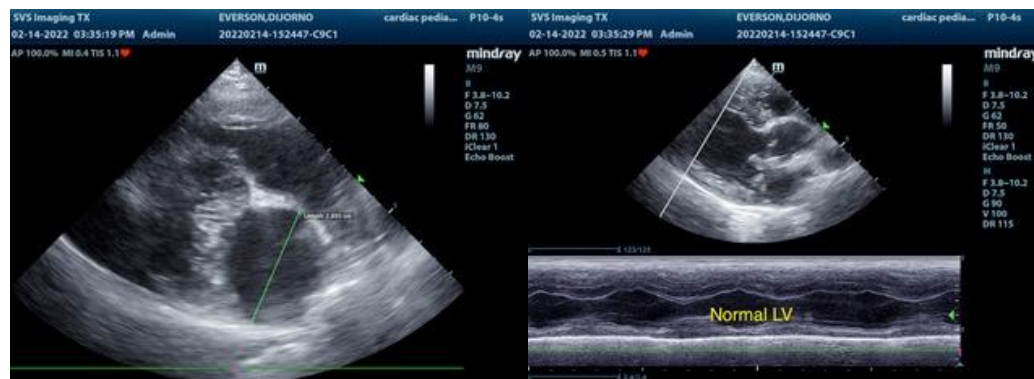
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

REFERRING VET

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.

Dr. Miller, Creature
Comfort VS

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

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