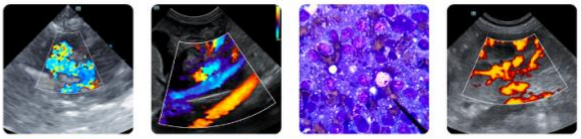

PATIENT

Oscar Pietras/Perkins

SPECIES

Canine

BREED

Dachshund

SEX

Neutered Male

AGE

14 Years 7 Months

WEIGHT

15 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jenni Tudini MRCVS, SDEP Cert (Abd)

HOSPITAL NAME

East Aurora Veterinary Hospital

REFERRING VET

Dr. Jenni Tudini MRCVS, SDEP Cert (Abd)

INVOICE

13984

DATE

02/26/26

PRESENTING CLINICAL SIGNS

- Patient recently seen for routine exam, no clinical signs reported but routine bloodwork raised concern for clinical heart disease and so given age we are pursuing an echocardiogram

Abnormal PE/Chem/CBC/UA Results: No pertinent clinical findings - CBC: Mild neutrophilia and monocytosis - Biochem: SDMA 16 (0-14) - ProBNP 1453 (0-900) - 4Dx and fecal: NEG

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	--	--	NM	1.1	40	74	0.2
CANINE CARDIAC PARAMETERS	**HR** (BPM)	**AV VMAX** (m/s)	**PV MAX** (m/s)	**BODY WEIGHT** (lbs)	**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	1.0	0.5	15.0	2.6	2.4	--

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** dimension based on 2 different LA measurement methods. The cranial and caudal **mitral** valve leaflets presented mild thickening consistent with mild degenerative change/endocardiosis. Doppler revealed mild centralized MR. 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 adequate linear morphology. 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 cardiac / pericardial tumors was visible.

ULTRASONOGRAPHIC FINDINGS

- Normal cardiac structure/function.

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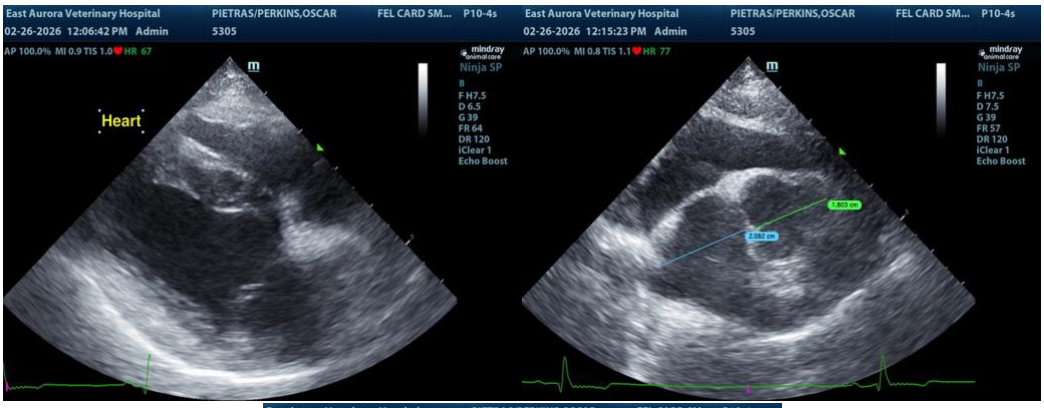
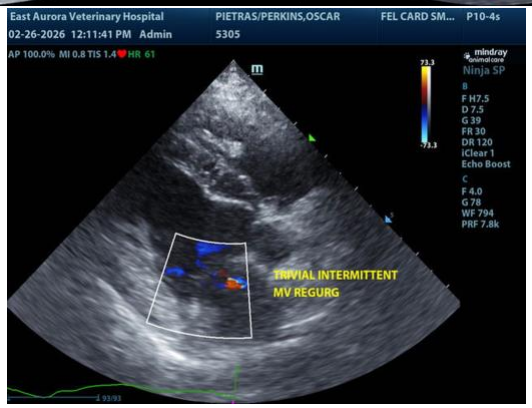
- Intermittent to mild mitral valve insufficiency (B1).

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of clinical issues such as left or right heart chamber enlargement, LV systolic dysfunction, arrhythmia, or pulmonary hypertension. The intermittent to mild mitral valve insufficiency may not be audible given no reported murmur in this patient. Regardless, the hemodynamic effects of the mild MR are low. No indication for cardiac medication. Recheck echo is suggested in 8-12 months, sooner if clinically indicated. No anesthetic contraindications. 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.

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

info@SonoPath.com