



PATIENT PRESENTING CLINICAL SIGNS

Nala Marvel new heart murmur noted on emergency visit. had a collapse/ syncopal event this morning. Bloodwork was w/ in normal limits (historic CKD) radiographs showed enlarged heart. normal physical exam.
SPECIES Meds: Benazapril 1.25 mg BID, Ursodiol 37.5 mg PO SID, Prin 12.5 mg PO BID, Amlodipine 2.5 mg in AM and 1.25 mg in PM, RC Renal diet,

Canine Abnormal PE/Chem/CBC/UA Results: BUN 31.2, Creat 1.4, historic CKD

BREED ULTRASONOGRAPHIC EXAMINATION OF THE HEART

Maltese Mix

SEX

FS

AGE

16yr

WEIGHT

9lb

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	--	--	--	1.2	50	81	0.1
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT	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	1.9	1.3	9lb	1.9	2.1	--

INTERPRETED BY

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

IMAGING PERFORMED BY

Rebecca Hamilton

HOSPITAL NAME

Newburgh Veterinary Hospital

REFERRING VET

Dr Acevedo

INVOICE
24919

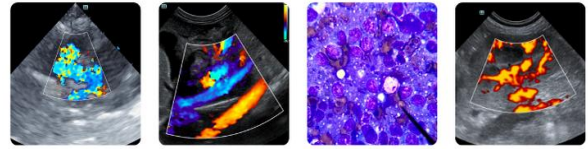
DATE
05/22/2026

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. No overt MR on Doppler. 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. Normal measured LVOT velocity. 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. No overt TR on Doppler or evidence of clinical pulmonary hypertension. 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). Normal measured RVOT velocity. No visible pericardial or free pleural fluid was noted. The cranial mediastinum and pericardial and extra-cardiac regions were free of masses in the visible window. No evidence of arrhythmia.

ULTRASONOGRAPHIC FINDINGS

Primary



PATIENT

- Normal cardiac structure/ function

Nala Marvel

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

No evidence of structural /functional cardiomyopathy or arrhythmia as an obvious cause of the patient's clinical history. No indication for cardiac medications. ECG or Holter monitor may be considered to assess for or rule out intermittent to paroxysmal arrhythmia.

Canine

BREED

Maltese Mix

SEX

FS

AGE

16yr

WEIGHT

9lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Rebecca Hamilton

HOSPITAL NAME

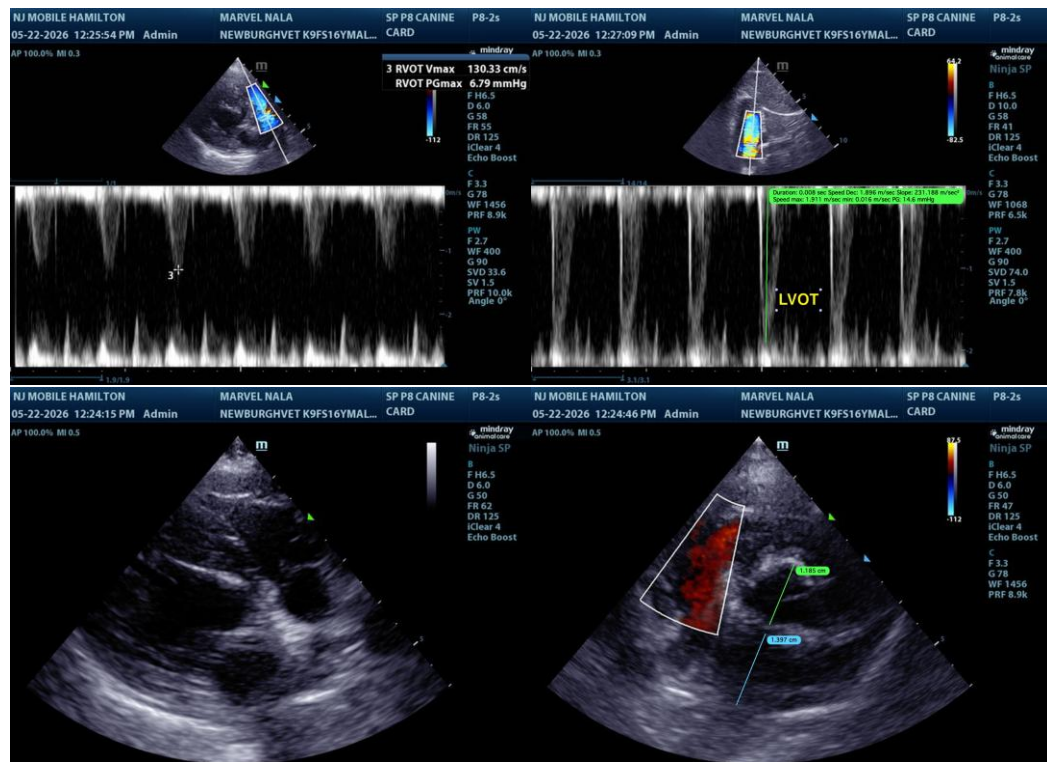
Newburgh Veterinary Hospital

REFERRING VET

Dr Acevedo

INVOICE
24919

DATE
05/22/2026



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 Practise)
info@sonopath.com