



PATIENT

Marco Walker

SPECIES

Canine

BREED

English Foxhound

SEX

MN

AGE

11 years

WEIGHT

64.8 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

Veterinary Wellness
Center- Glen Rock

REFERRING VET

Dr. Sepulveda

INVOICE

14102

DATE

6/15/22

PRESENTING CLINICAL SIGNS

Cardiac murmur I/VI

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

CANINE	MR	TR	LA/AO	LA/AO	FS	EF	EPSS
CARDIAC PARAMETERS	VMAX (m/s)	VMAX (m/s)	(Boon method)	(Heart Base; Swe)	(%)	(%)	(cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.3	28-40	40-100	<0.6
PATIENT	5.5	2.5	1.5	1.42	42.1	73.4	0.22
CANINE	HR	AV	PV	BODY WEIGHT	LA	LVIDd	LVIDs
CARDIAC PARAMETERS	(BPM)	VMAX (m/s)	MAX (m/s)	(kg)	2D short axis Base view (cm)	Avg; 2D and m-mode short axis (cm)	Avg; 2D and m-mode short axis (cm)
NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6				
PATIENT	103	1.5	1.1	5.0		4.4	

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 mild vegetative thickening consistent with mild endocardiosis. Doppler indicated measurable 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 adequate linear morphology. Mild TR was 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). Trace PI was present on color doppler. 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.



PATIENT

Marco Walker

SPECIES

Canine

BREED

English Foxhound

SEX

MN

AGE

11 years

WEIGHT

64.8 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

Veterinary Wellness
Center- Glen Rock

REFERRING VET

Dr. Sepulveda

INVOICE

14102

DATE

6/15/22

ULTRASONOGRAPHIC FINDINGS

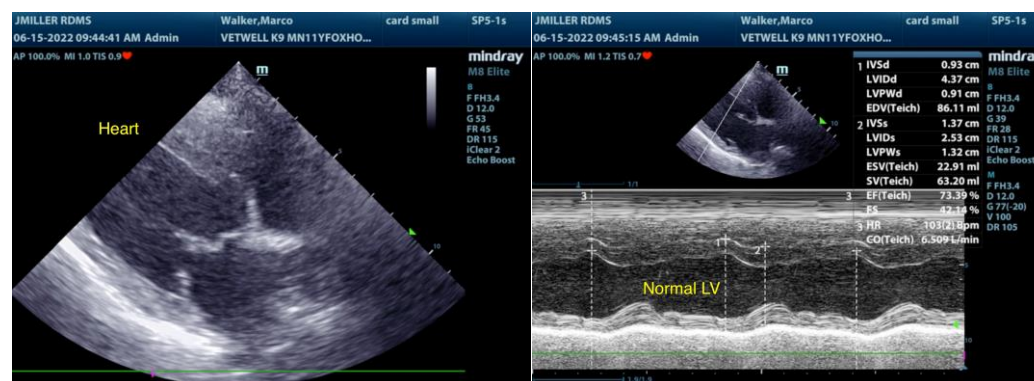
- Compensated mitral valve insufficiency
- Mild TV insufficiency
- Tract pulmonic insufficiency

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The cause of the murmur is most consistent with mild chronic degenerative valvular changes with primary eccentric mitral valve insufficiency. Concurrent minor TV and pulmonic insufficiency were also noted yet not considered to be clinically significant. The lack of left atrium enlargement indicates that the hemodynamic effects of the mitral valve insufficiency at this stage are low and therefore indicated that risk of current and future complications going forward is relatively low.

In a nonclinical patient without evidence of significant chamber enlargement, cardiac medications are not specifically indicated. Conservative monitoring of the murmur at this stage would be appropriate. No anesthetic contraindications are indicated, based on this study. The following anesthetic protocol is suggested. Recheck echocardiogram is recommended in 6 months, as serial sonographic monitoring is required for further prognosis., sooner if clinical signs consistent with heart disease arise.

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.





PATIENT

Marco Walker

SPECIES

Canine

BREED

English Foxhound

SEX

MN

AGE

11 years

WEIGHT

64.8 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

Veterinary Wellness
Center- Glen Rock

REFERRING VET

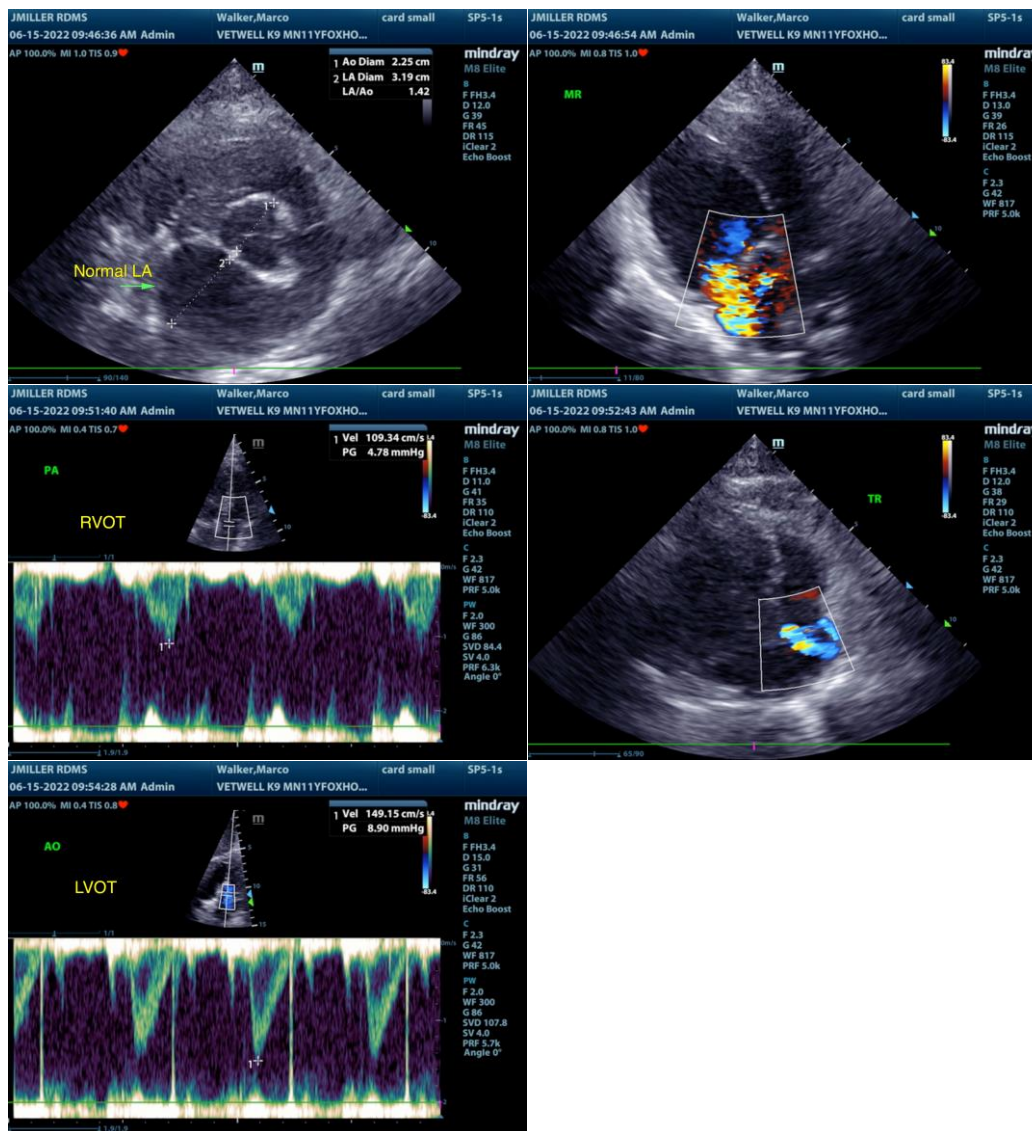
Dr. Sepulveda

INVOICE

14102

DATE

6/15/22



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