


PATIENT PRESENTING CLINICAL SIGNS

PATIENT Darcy Barletto **History:** Had compensated mitral and tricuspid insufficiency - scan 3/18/21. Sudden onset ascites, weakness **Current meds:** furosemide- started 3 days ago

SPECIES Abnormal PE/Chem/CBC/UA Results: NSF- Albumin 26. Cytology- modified transudate, cytology pending
 Canine

ULTRASONOGRAPHIC EXAMINATION OF THE HEART
BREED

Mix

SEX

FS

AGE

12 yr

WEIGHT

55 lb

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	<1.3	28-40	40-100	<0.6
PATIENT	5.0		1.0	1.0	39	70.8	0.1
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				
PATIENT	168	1.0	0.8		2.8	3.2	

INTERPRETED BY

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

IMAGING PERFORMED BY
 Jessica Miller

HOSPITAL NAME

Fredon Animal Hospital

REFERRING VET

Dr. Grau

INVOICE

10871ag

DATE

06/21/2022

Cardiac Presentation

The echocardiogram in this patient demonstrated normal left atrial size based on 3 different LA measurement methods. The cranial and caudal mitral valve leaflets presented minor vegetative thickening consistent with mild endocardiosis. Doppler indicated measurable mild 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 increased size with concurrent increased right ventricle size. A large mildly nonhomogeneous mass occupying the majority of the right atrium and right ventricular lumen was present measuring approximately 8.0 cm x 3.5 cm.. 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. The cranial mediastinum and pericardial regions were free of additional or overt masses in the visible window.

ULTRASONOGRAPHIC FINDINGS

- A large mass occupying the majority of the right atrium and ventricular lumen



PATIENT

- Mild mitral valve insufficiency, normal LA

Darcy Barletto

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SPECIES

The primary finding in this study is the large mass occupying the majority of the right atrium and ventricular lumen consistent with neoplastic criteria. This mass given the size is likely impeding return blood flow leading to abdominal ascites. Unfortunately an unfavorable prognosis is indicated.

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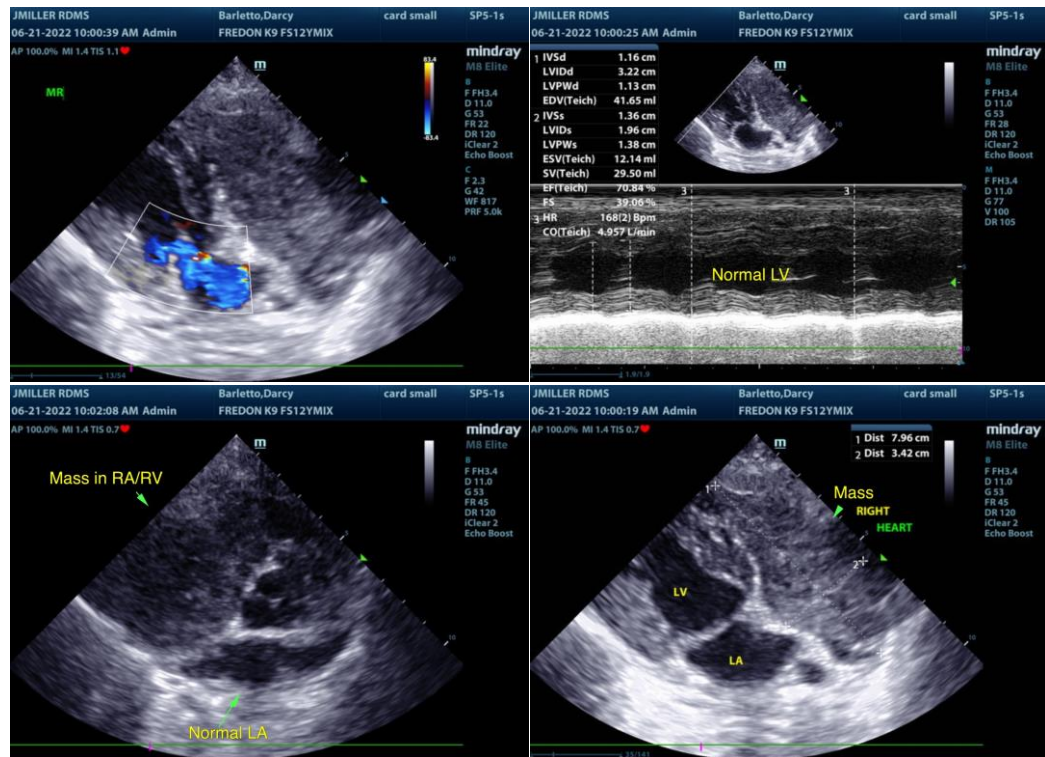
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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