



PATIENT

"Harley" Martucci

SPECIES

Canine

BREED

Yorkiepool

SEX

MN

AGE

18yr

WEIGHT

15lb

PRESENTING CLINICAL SIGNS

Patient presented yesterday in a cyanotic state despite O2 treatment. Radiographs show severe right sided heart enlargement with dorsal deviation of the trachea. Patient was treated with Ace and Dex IV, no oral meds dispensed.

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	<1.3	28-40	40-100	<0.6
PATIENT	5.4	<2.0		1.4	44	77.5	0.2
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	106	1.7	1.1		2.3	2.1	

Cardiac Presentation

Mildly prominent RA/RV without overt evidence of right free wall hypertrophy or tricuspid regurgitation. Mild TR present on Doppler. No evidence of neoplasia associated with the right auricle or elsewhere in the heart. The pulmonary artery was uniformly mildly prominent in size compared to the aorta with normal measured RVOT. Normal systolic laminar flow was present on color Doppler.

The left heart demonstrated normal volume and septal/free wall dimension with adequate contractility of the LV as demonstrated by the FS measurement. The mitral valve was mildly thickened consistent with endocardiosis with mild eccentric MR present on Doppler. Normal LA dimension without LA enlargement. Normal measured LVOT. No pericardial tumors, effusion or pleural effusion was noted. No overt arrhythmia.

ULTRASONOGRAPHIC FINDINGS

- Compensated mild MR, normal LA/LV.
- Mildly prominent RA/RV-suggestive of cor pulmonale.
- Mild TR-estimated pulmonary pressure gradient not overtly consistent with clinical pulmonary

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Without overt evidence of clinical pulmonary hypertension based on estimated pulmonary pressure gradient and without evidence of left sided congestive criteria, the mildly prominent right heart is suggestive of cor pulmonale and is suspected to be secondary to excessive intrathoracic pressure most likely secondary to chronic respiratory disease.

No overt indication for cardiac medications although if strong clinical concern for pulmonary hypertension, a low dose sildenafil trial, Sildenafil 1-2 mg/kg PO BID with assessment of clinical response could be considered. Respiratory support +/- antibiotic trial i.e., enrofloxacin or doxycycline

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Westwood Regional Veterinary Hospital

REFERRING VET

Dr. Jessica Silver

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is recommended. Recheck echocardiogram recommended if progressive respiratory signs or if signs consistent with heart disease arise.

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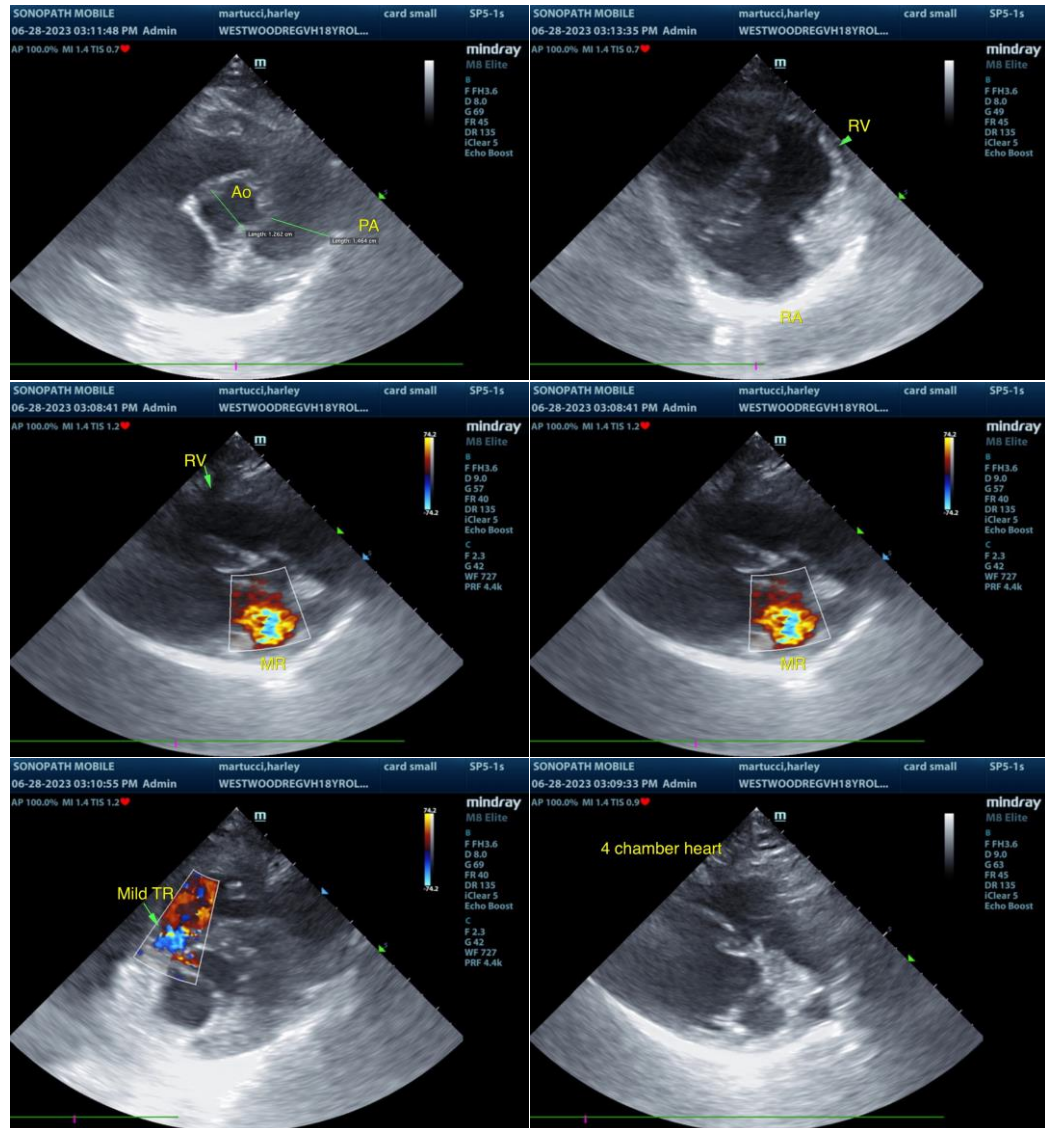
Dr. Jessica Silver

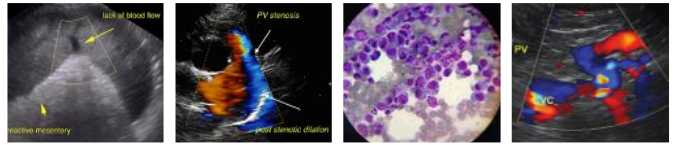
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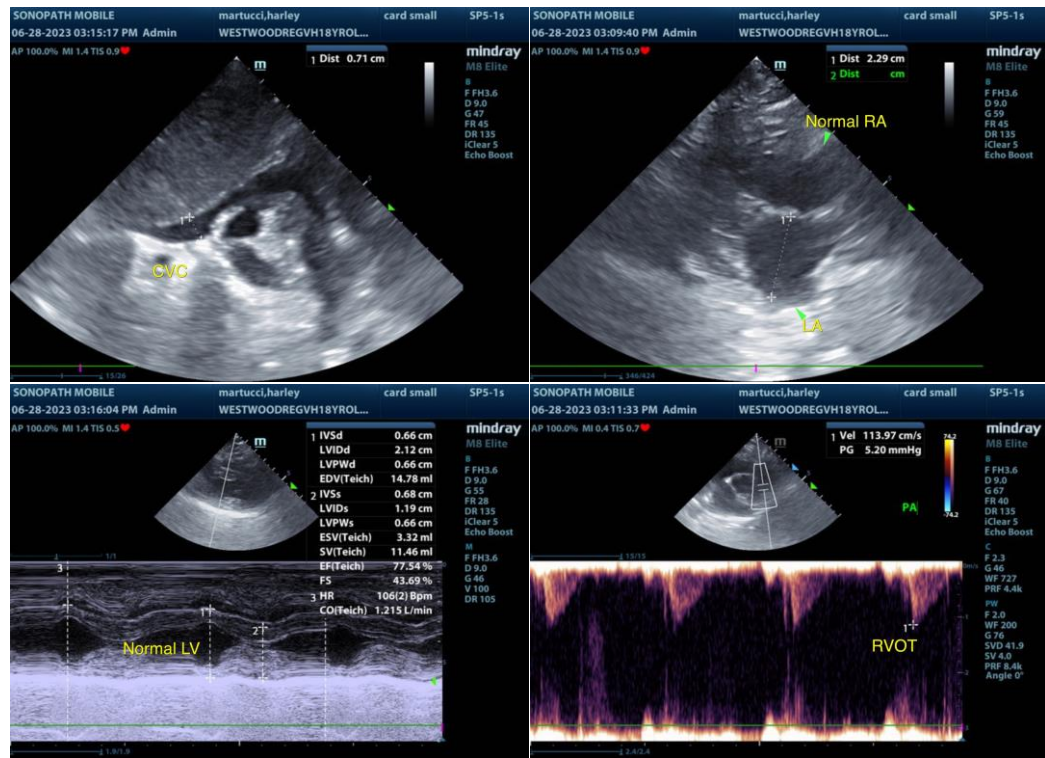
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

IMAGING PERFORMED BY

Kelly Vazquez

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