



PATIENT

Gracie Brennan

SPECIES

Rabbit

BREED

Angora

SEX

Spayed Female

AGE

7 years

WEIGHT

2.94 kg.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Veronica Damian

HOSPITAL NAME

Soundiagnosis

REFERRING VET

Dr. Veronica
Damian

INVOICE

12096

DATE

8/10/21

PRESENTING CLINICAL SIGNS

Scanned previously by Specialist cardiologist and diagnosed with MV regurgitation no medications recommended at that time in (unknown date). Now presented for lethargy, been chased more by other rabbits, frong left limb lameness. and history of a bulging thoracic disc by CT also in the past (owner did not provided dates)

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

CARDIAC PARAMETERS	BODY WEIGHT (kg)	HR (BPM)	IVSd (cm)	LVIDd (cm)	LVWd (cm)	FS (%)	EF (%)
NORMAL PARAMETER	-----	150-240	0.3-0.6	1.0-2.1	0.25-0.6	35-67	80-100
PATIENT		NM	0.42	1.08	0.36	47	82
CARDIAC PARAMETERS	LA/AO (Boon)	LA/AO HEART BASE (Sisson)	LA 2D 4-chamber long axis AS to FW (Sisson) (cm)	LVOT VEL. (m/s)	RVOT VEL. (m/s)	IVRT (m/)	
NORMAL PARAMETER	<1.5	0.88-1.79	0.7-1.7	<1.6	<1.3	40-60	
PATIENT	1.38	1.1	NM	1.0	0.9	NM	
Adapted from June Boon, Veterinary Echocardiography, 1998							
Sisson D et al. JVIM 1991; 5: 232, Jacobs et al. Am J Vet Res 1985; 46:1705							

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 separate LA measurements. The cranial and caudal **mitral** valve leaflets presented normal linear structure and kinetics. The **left ventricle** presented normal 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 and angles 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 and kinetics. 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 or extra cardiac pathology in the visible planes. The cranial **mediastinum and pericardial regions** were free of masses in the visible window.



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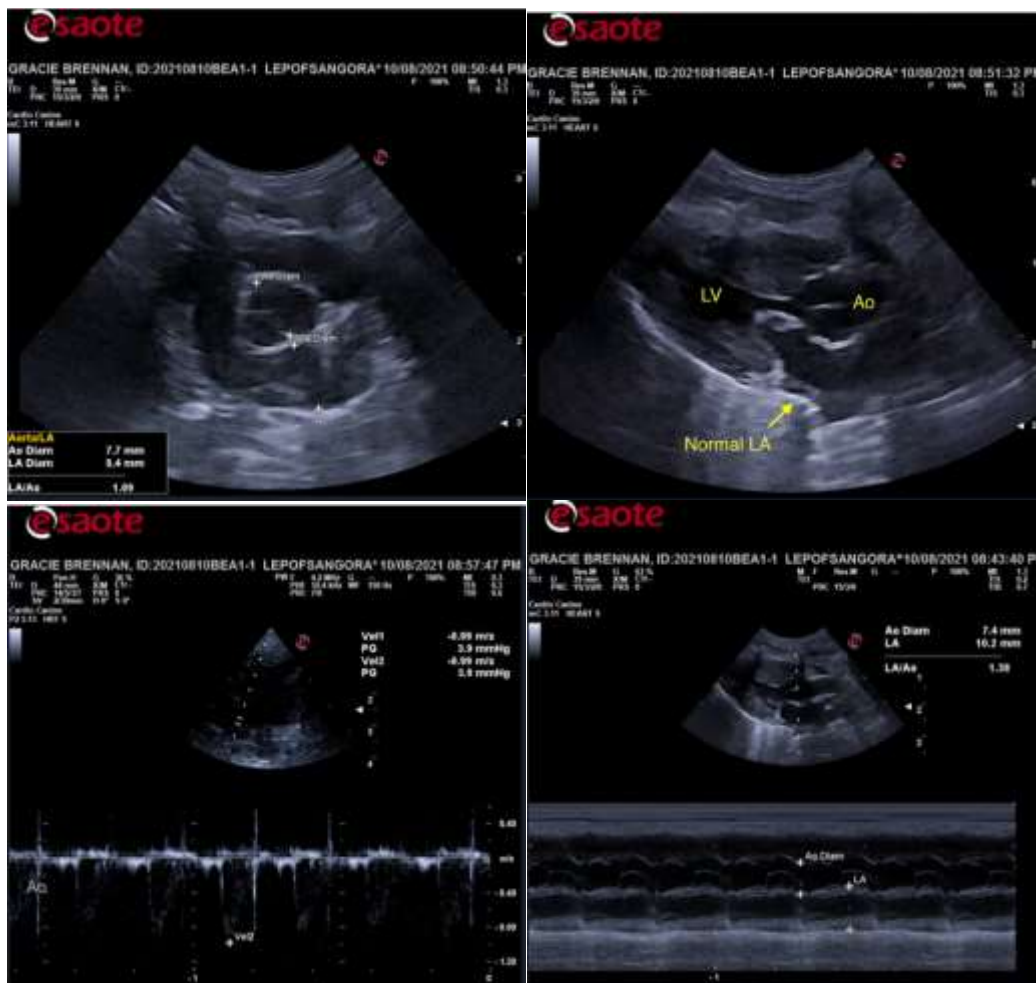
ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Overtly normal cardiac structure and function

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The potential for previously diagnosed mitral valve regurgitation is possible. However, the lack of left atrium enlargement indicates that the risk of future complication is low. No other issues such as systolic dysfunction, clinical pulmonary hypertension, or evidence of additional valvular insufficiencies or stenotic disease were noted. Clinical signs associated with heart disease are not expected in a nonclinical patient with the potential for previously diagnosed mitral regurgitation and without evidence of left atrium enlargement. Cardiac medications are not indicated. Continued monitoring would be appropriate at this time. Recheck echocardiogram could be considered in 6 months, sooner if clinical signs consistent with heart disease develop.





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The information and recommendations provided are based on the images presented by the referring veterinarian. 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