



PATIENT

Buckwheat Fredericy

SPECIES

Canine

BREED

Yorkie

SEX

Neutered Males

AGE

9 Years 5 Months

WEIGHT

7.6 Pounds

INTERPRETED BY

Sara Brethel, DVM,
 DACVIM (Cardiology)

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Stoney Creek VH

REFERRING VET

Dr. Eldred

INVOICE

35298

DATE

1/8/26

PRESENTING CLINICAL SIGNS

History: P presented for echo due to enlarged heart on rads. No murmur or arrhythmia heard. Please comment on anesthesia for dental cleaning.

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

| 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 | -- | -- | NM | 1.4 | 50.21 | -- | NM |
| CANINE CARDIAC PARAMETERS | HR (BPM) | AV VMAX (m/s) | PV MAX (m/s) | BODY WEIGHT (kg) | 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 | -- | 2.11 | 2.34 | 3.45 | 2.0 | 2.35 | 1.17 |

Cardiac Presentation

The mitral valve leaflets are normal and there is no mitral regurgitation. There is no prolapse of the mitral valve leaflets. The left atrial size is normal. Left ventricular systolic and diastolic function is within normal limits. There is normal right atrial size without evidence of tricuspid regurgitation. There is no prolapse of the tricuspid valve leaflets and no evidence of pulmonary hypertension on today's evaluation. The right ventricle subjectively appears normal in structure and function. The aortic and pulmonic valves have normal morphology with high/normal to mildly increased pulmonic outflow velocities and high/normal aortic outflow velocities. There is no evidence of pulmonic or aortic insufficiency. The aorta appears normal. The pulmonary artery and associated branches appear normal. There is no evidence of pleural effusion, pericardial effusion, or intracardiac masses.

ULTRASONOGRAPHIC FINDINGS

- High/normal aortic outflow velocities
- High normal to mildly increased pulmonic outflow velocities

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The heart is not enlarged. Structurally, the heart appears normal, however, pulmonic outflow velocities are at the upper limits of normal to mildly increased. This could represent a physiologic variant;



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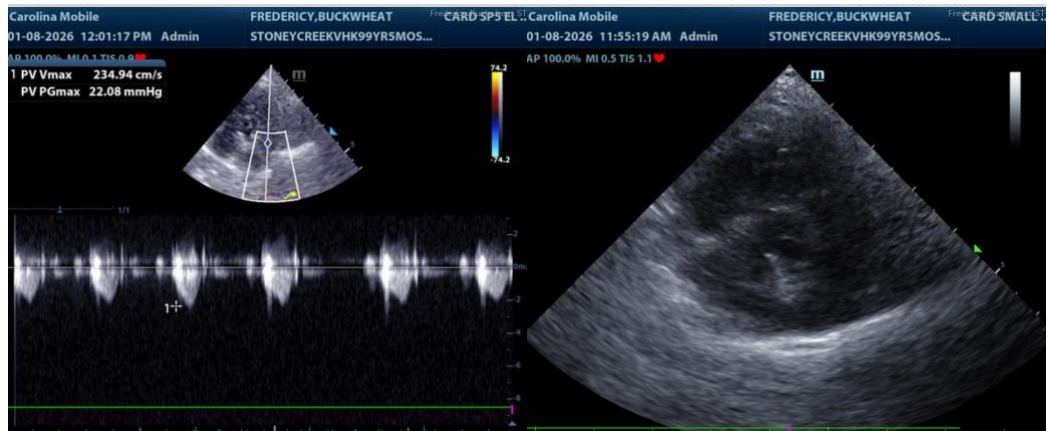
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however, a mild form of pulmonic stenosis cannot be ruled out. In the absence of a heart murmur, this is considered less likely. A recheck echocardiogram is not needed, unless the patient develops a heart murmur or an arrhythmia. There are no contraindications to anesthesia. Since I can't rule out a mild component of PS, I recommend avoiding dexmedetomidine and ketamine in this patient for anesthetic purposes.



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.

Sara Brethel DVM, DACVIM (Cardiology)

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