

**PATIENT**

Willa Anderson

**SPECIES**

Canine

**BREED**

Australian Shepherd

**SEX**

Spayed Female

**AGE**

10 Years

**WEIGHT**

47.6 Pounds

**INTERPRETED BY**

Sara Brethel DVM,  
 DACVIM (Cardiology)

**IMAGING PERFORMED BY**

Kathleen Byrnes

**HOSPITAL NAME**

Scotts Sreek AH

**REFERRING VET**

Dr. Cartner

**INVOICE**

35414

**DATE**

11/6/25

**PRESENTING CLINICAL SIGNS**

History: P presented for Echo due to increased panting, lethargy, and mildly decreased appetite. P on antibiotics for WBCs in urine.

Abnormal PE/Chem/CBC/UA Results: K+ 6.6, Na 146, NA: K ratio 22 usg 1.023, trace protein, WBC 20-30 ACTH stim and LDDST wnl.

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

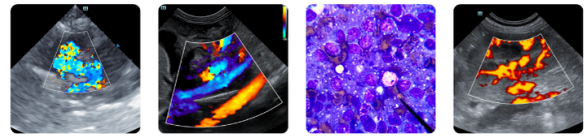
CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (M-Mode)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
<b>NORMAL PARAMETER</b>	4.5-5.5	<2.7	1.3	Up to 1.6	28-40	40-100	<0.6
<b>PATIENT</b>	4.5	1.51	1.4	1.47	36.88	--	NM
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LAD LA MAX 4 Chamber	LVIDd Avg; 2D and m-mode short axis (cm)	LVIDs Avg; 2D and m-mode short axis (cm)
<b>NORMAL PARAMETER</b>	50-100	0.7-1.7	0.7-1.6				
<b>PATIENT</b>	157	1.57	0.91	21.63	3.69	3.66	2.31

**Chest Radiographic Interpretation**

The cardiac silhouette is within normal limits. The pulmonary vasculature is normal. There is no evidence of cardiogenic pulmonary edema.

**Cardiac Presentation Chest Radiographic Interpretation**

The mitral valve leaflets are mildly thickened with mild mitral regurgitation posteriorly directed. There is no prolapse of the mitral valve leaflet. The left atrial size is normal. Left ventricular internal dimensions during diastole are within normal limits and systolic function is preserved in the face of mitral regurgitation. There is normal right atrial size with mild tricuspid regurgitation. There is no prolapse of the tricuspid valve leaflets and no evidence of pulmonary hypertension based upon tricuspid regurgitant velocities. The right ventricle subjectively appears normal in structure and function. The aortic and pulmonic valves have normal morphology and the corresponding outflow velocities are within normal limits. 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.



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**ULTRASONOGRAPHIC FINDINGS**

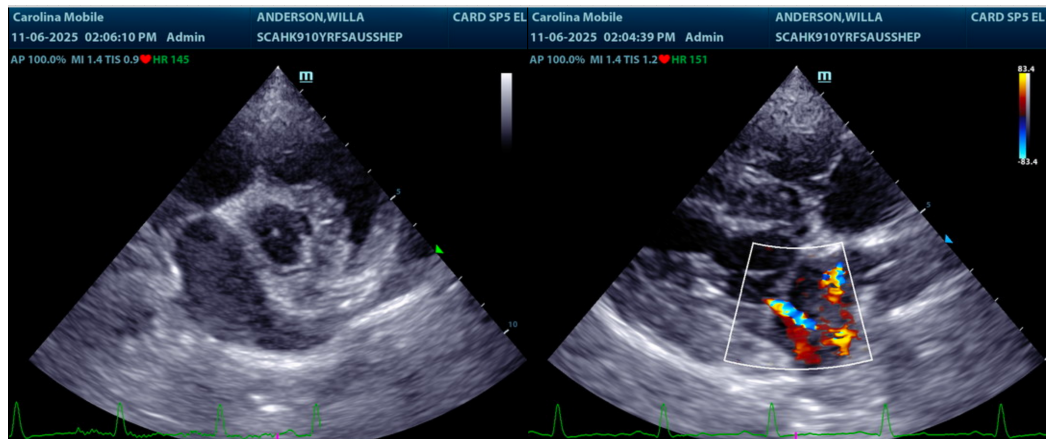
- Degenerative valve disease, ACVIM stage B-1
- Mild tricuspid regurgitation without evidence of pulmonary hypertension

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The patient has degenerative valve disease ACVIM stage B1 and no cardiac medications are indicated at this time. Since this can be a progressive condition, serial monitoring is recommended. A recheck echocardiogram is recommended in 6 months. A sooner recheck is recommended if the patient develops a heart murmur or the patients respiratory status is worsening. Elective anesthetic procedures should be well tolerated.

Recommend obtaining a blood pressure on the patient to ensure it is <160mmHg. If the blood pressure is elevated recommend following ACVIM guidelines for systemic hypertension and treating if indicated.

The cause for the patient's clinical signs is not identified based upon the echocardiographic images provided. Recommend continued investigation and can consider an abdominal ultrasound and repeating full blood work as well to evaluate for any emerging patterns.



**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)

[info@SonoPath.com](mailto:info@SonoPath.com)