



**PATIENT**

Aslan Oakes

**SPECIES**

Canine

**BREED**

Bernese Mtn. Dog

**SEX**

Neutered Male

**AGE**

5 Years

**WEIGHT**

93.4 Pounds

**INTERPRETED BY**

Sara Brethel DVM,  
DACVIM (Cardiology)

**IMAGING PERFORMED BY**

Sara Hansen

**HOSPITAL NAME**

Edgewood AC

**REFERRING VET**

Dr. Callahan

**INVOICE**

35932

**DATE**

12/16/25

**PRESENTING CLINICAL SIGNS**

History: Clinical Exam Findings: DENTAL CALCULI ABNORMAL Labwork Values CBC/ CHEM/ T4/ UA WNL ECG-SUPERVENTRICULAR ARRHYTHMIA For ECHO Only: Blood Pressure 150 AVG HR/RR/BP: 150/ PANT/ 150 Is there a Heart Murmur? If so, please grade. NO Current Medications NONE Radiographic Findings NONE Notes to Specialist (if any) PRE OP WORK UP FOR DENTAL CLEANING.

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

<b>CANINE CARDIAC PARAMETERS</b>	<b>MR VMAX</b> (m/s)	<b>TR VMAX</b> (m/s)	<b>LA/AO</b> (M-Mode)	<b>LA/AO</b> (Heart Base; Swe)	<b>FS</b> (%)	<b>EF</b> (%)	<b>EPSS</b> (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>	--	--	1.04	1.04	28.2	--	NM
<b>CANINE CARDIAC PARAMETERS</b>	<b>HR</b> (BPM)	<b>AV VMAX</b> (m/s)	<b>PV MAX</b> (m/s)	<b>BODY WEIGHT</b> (kg)	<b>LAD</b> LA MAX 4 Chamber	<b>LVIDd</b> Avg; 2D and m-mode short axis (cm)	<b>LVIDs</b> 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>	--	0.88	1.04	42.45	4.4	3.9	2.8

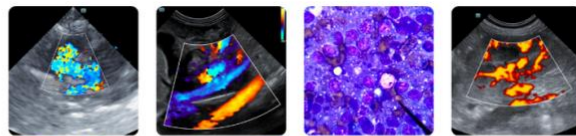
**Cardiac Presentation**

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 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.

**ULTRASONOGRAPHIC FINDINGS**

- Structurally normal heart
- Reported supraventricular arrhythmia

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**



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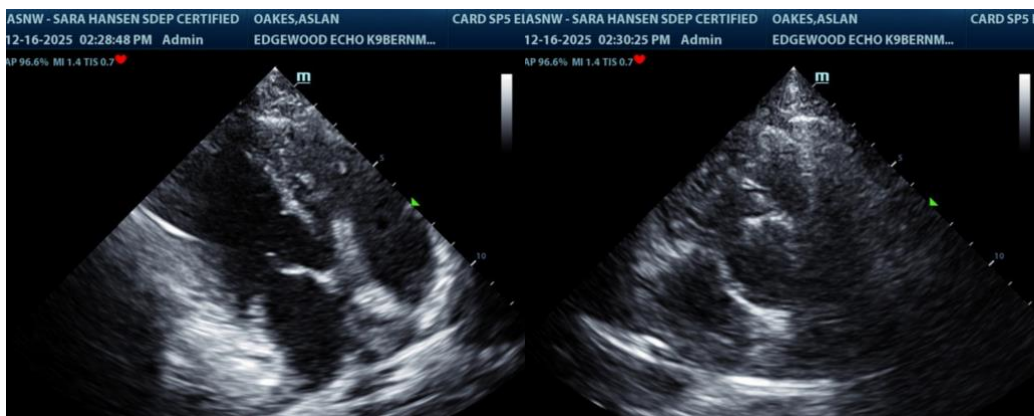
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An obvious arrhythmia is not identified during the echocardiogram. Recommend further evaluation with an ECG and also considering a Holter monitor. Recommend ensuring the reported arrhythmia is not clinically significant with a Holter monitor prior to moving forward with elective anesthetic procedures, as long as the patient's heart rate is stable. Standard perioperative fluid rates should be well-tolerated. Medications like dexmedetomidine and other alpha 2 agonists are best avoided. Ketamine is also best avoided. Anticholinergics can be used in the case of a clinically significant bradyarrhythmia (i.e., bradycardia with concurrent hypotension). If the patient is on an ACEi, recommend not giving this therapy the day of anesthesia.



**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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