

PATIENT

Domino Coventry

SPECIES

Canine

BREED

Labrador Mix

SEX

Neutered Male

AGE

4 Years

WEIGHT

76 pounds

INTERPRETED BY

Sara Brethel DVM,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

West Hills Animal
Hospital

REFERRING VET

Dr. Pospichal

INVOICE

13858

DATE

02/17/26

PRESENTING CLINICAL SIGNS

- Clinical Exam Findings: Grade 3/6 R basilar systolic murmur. Normal rate and rhythm, synchronous femoral pulses.
- HR/RR/BP: 130/40/pending
- Is there a Heart Murmur? If so, please grade: Grade 3/6 R basilar systolic murmur.
- Primary question to be answered: Source of Murmur

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	5.44	--	1.0	1.44	21.12	--	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	NM	1.16	0.95	34.54	3.8	3.93	3.1

Cardiac Presentation

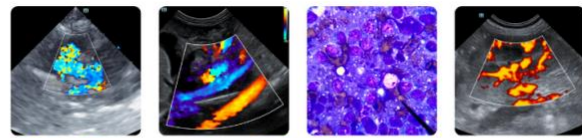
The mitral valve leaflets are normal and there is trivial mitral regurgitation. There is no prolapse of the mitral valve leaflets. The left atrial size is normal. Left ventricular systolic and diastolic function is within normal limits, however, left ventricular systolic function appears low normal. 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.

EKG

Sinus rhythm with sinus arrhythmia.

ULTRASONOGRAPHIC FINDINGS

- Trivial mitral regurgitation.



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- Low normal left ventricular systolic function.

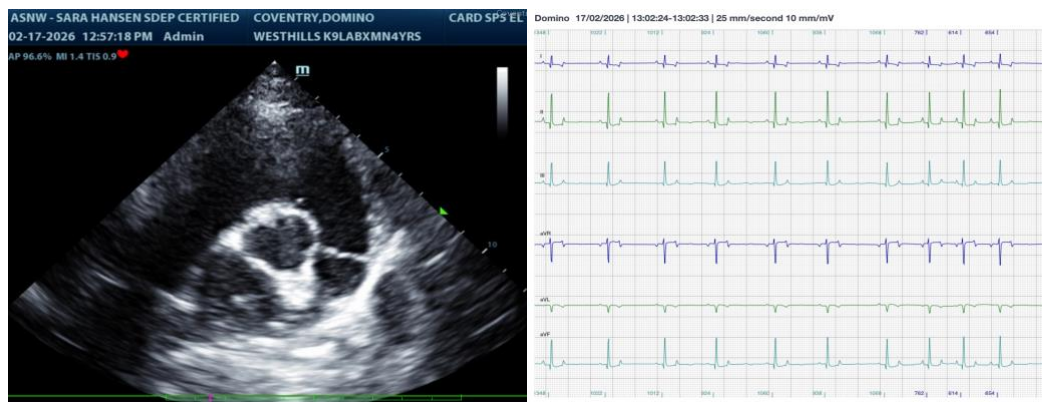
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The patient's murmur is likely due to the mitral regurgitation and there is low normal left ventricular systolic function. I recommend ensuring the patient is on a traditional grain-based diet if there is no history of food allergies.

It recommended to consider switching to a grain-based commercial dog food diet made by Purina, Science Diet, or Royal Canin (if there is no history of a food allergy) since there is currently an association between cardiac changes (poor pumping function and dilation of the heart) and multiple grain free and limited ingredient diets. Current investigation is still underway, and the definitive causative factor has not been identified. A grain source including corn or barley should be seen on the dog food label. Substitutes for common grain sources such as peas, lentils and even rice have been implicated in cardiac dysfunction. Any diet change should be gradual by adding small amounts to the current diet first and then increasing the ratio of the new food gradually over two weeks to avoid gastrointestinal upset.

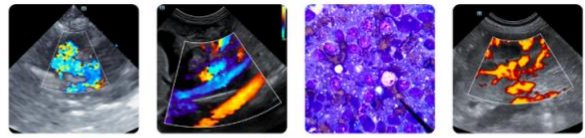
Other diagnostics to consider include performing a troponin and a proBNP. Low normal left ventricular systolic function can sometimes be seen in athletic patients. If the biomarkers are normal, I am less suspicious of an underlying left ventricular systolic complication, however with the concurrent mitral regurgitation, biomarkers may be skewed.

The mitral regurgitation can be physiologic but also can be early evidence of conditions such as dilated cardiomyopathy. The heart is not dilated. The measurements are technically normal. No cardiac therapies are recommended at this time, but serial monitoring should be performed. A recheck echocardiogram of blood pressure is recommended in six months, sooner if the murmur is worsening in intensity or the patient is developing cardiovascular clinical signs. I also recommend ensuring full blood work is normal along with a thyroid hormone.



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.



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