



PATIENT

Eddie Falkenberg

SPECIES

Canine

BREED

Greater Swiss Mountain Dog Mix

SEX

Neutered Male

AGE

5 Years

WEIGHT

29.5 kg

INTERPRETED BY

Sara Brethel DVM, DACVIM (Cardiology)

IMAGING PERFORMED BY

Dr. Lacovides

HOSPITAL NAME

Tuxedo Animal Hospital

REFERRING VET

Dr. Chartrand

INVOICE

14418

DATE

03/18/26

PRESENTING CLINICAL SIGNS

- Possibly heard a murmur last year. Was in for his annual this year, more clear murmur present. BCS 3-4/9, lost 1kg since last year (but not feeding as many treats in the winter due to less activity). He is on a grain free diet (Orijen Original) with multiple pulse crop ingredients (red lentils, pinto beans, navy beans, green lentils, chickpeas, whole peas). He is not symptomatic

Abnormal PE/Chem/CBC/UA Results: Grade 2/6 systolic 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	--	2.53	NM	1.05	37.21	--	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	NM	1.52	0.8	29.5	3.85	4.3	2.7

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 with trivial eccentric 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

- Trivial eccentric tricuspid regurgitation.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS



PATIENT

Eddie Falkenberg

SPECIES

Canine

BREED

Greater Swiss
Mountain Dog Mix

SEX

Neutered Male

AGE

5 Years

WEIGHT

29.5 kg

INTERPRETED BY

Sara Brethel DVM,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Dr. Lacovides

HOSPITAL NAME

Tuxedo Animal
Hospital

REFERRING VET

Dr. Chartrand

INVOICE

14418

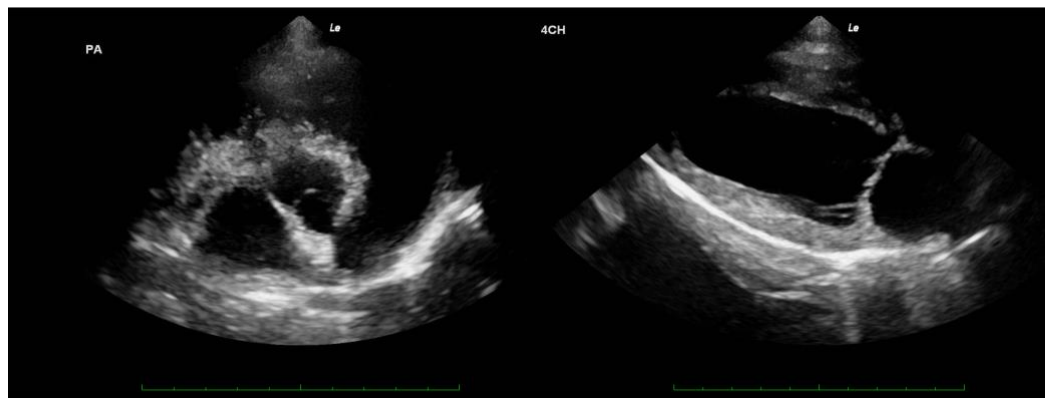
DATE

03/18/26

A cause of the murmur is not identified on the images provided. There is some trivial tricuspid regurgitation. No significant evidence of pulmonary hypertension. Left ventricular systolic and diastolic function is normal. Due to the patient's diet history, if the clients are open to it, I would consider switching to a traditional grain-based diet. However, to be clear, there are no signs of a DCM phenotype on the images provided.

It is 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.

Can consider a recheck echo in a year, otherwise recheck echo if a murmur is persistently present and/or the patient develops an arrhythmia.



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