

PATIENT

Lizzie Asher

SPECIES

Canine

BREED

American Bulldog

SEX

Intact Female

AGE

8 Years

WEIGHT

46.9 pounds

PRESENTING CLINICAL SIGNS

- Appreciates 300mg Gabapentin for visit. Not a fan of pokes but LOVES people. Loves treats. Very compliant of all treatments. Prolapsed nictitating membrane OD- gland is very enlarged and firm (chronic irritation vs mass). KCS. Dermatitis. Otitis. Heart murmur 2/6. Lymphadenopathy
- ABNORMAL Labwork Values: Bloodwork results not back yet. Skin Cytology
- -Ventral dosum (impression slide): +3 cocci. abundant chromatin streaming and degenerative neutrophils
- -R cranial axilla (impression slide): +4 cocci, +2 yeast. occasional neutrophils
- Ear Cytology: AS +2 cocci / AD +1 yeast, +1 cocci
- For ECHO Only: Blood Pressure
- Blood Pressure: 4 cuff coccygeal - Average 132 / 56 (90)
- HR/RR/BP: 108bpm, 30 resp.
- Current Medications: RX: Cephalexin RX: PyoShampoo and mousse RX: Provable DC RX: Apoquel RX: Mometamax RX: Trazodone and Gabapentin for echo appointment RX: BNP w/ Dex, Optimimmune, eye lube

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

INTERPRETED BY
Sara Brethel DVM,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Animal Care Center

REFERRING VET

Dr. Harbord

INVOICE

14052

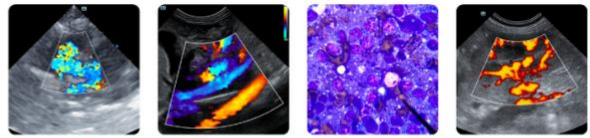
DATE

03/04/26

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	--	--	1.07	1.18	40	NM	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	1.61	1.1	23.31	3.0	3.0	1.8

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



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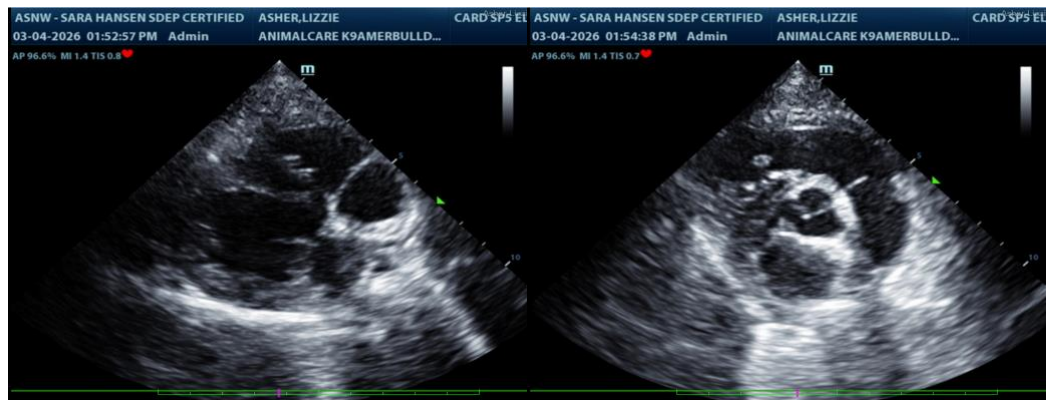
limits. There is no evidence of pulmonic or aortic insufficiency. The aorta appears normal. The pulmonary artery and associated branches appear normal. There is no evidence of pleural effusion, pericardial effusion, or intracardiac masses.

ULTRASONOGRAPHIC FINDINGS

- Structurally normal heart.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The heart is structurally normal. A cause of the murmur is not identified. If the murmur persists or worsens, recheck echo is recommended in 12 months, sooner if the patient is developing cardiovascular clinical signs.



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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