

**PATIENT PRESENTING CLINICAL SIGNS**

JR Masters • Grade 2/6 HM

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE HEART**

Canine

**BREED**

Pitbull

**SEX**

Neutered Male

**AGE**

6 Years

**WEIGHT**

66 pounds

**INTERPRETED BY**

Sara Brethel DVM,  
 DACVIM (Cardiology)

**IMAGING PERFORMED BY**

Kerri Becker

**HOSPITAL NAME**

Venturing Vet

**REFERRING VET**

Dr. Herzog

**INVOICE**

14068

**DATE**

03/05/26

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	NM	NM	NM	1.7	39.15	--	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	161	UE	~1.0	30.0	--	3.78	2.3

Aortic Root Diameter: 1.7

**Cardiac Presentation**

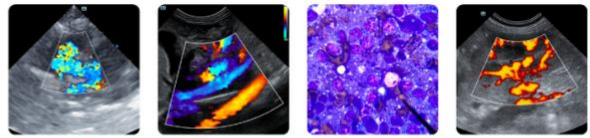
The mitral valve leaflets are mildly thickened with mild mitral regurgitation posteriorly directed. There is no prolapse of the mitral valve leaflet. The left atrial size is normal on long axis images and mildly enlarged on short axis images. This is due to the small aortic root and a skewed LA/AO ratio. 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 valves are mildly thickened and there is mild aortic insufficiency. The corresponding outflow velocities are underestimated. The pulmonic valves have normal morphology and normal corresponding outflow velocities. 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**

- Degenerative valve disease ACVIM stage B1.
- Elevated aortic outflow velocities.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The patient continues to have increased elevated aortic outflow velocities. There are some mild degenerative changes identified to the mitral and tricuspid valve which were not appreciated during



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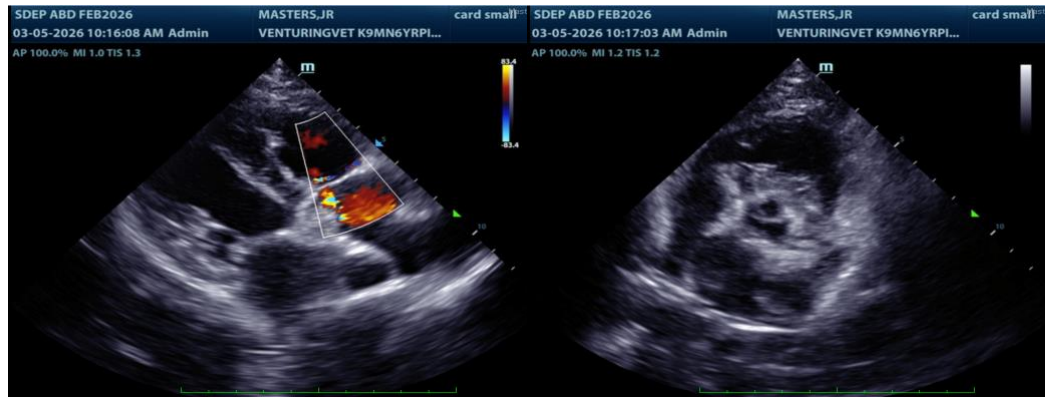
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the last evaluation. This likely represents an age-related change. No cardiac therapies are recommended.

I would recommend a recheck in six months due to the changes noted to the mitral and tricuspid valve. 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 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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