

PATIENT

Demon Acevedo

SPECIES

Canine

BREED

Dogo Argentino

SEX

Male

AGE

6 Years 7 Months

WEIGHT

97 lbs

INTERPRETED BY

Sara Brethel DVM,
 DACVIM (Cardiology)

PRESENTING CLINICAL SIGNS

BCS 4.5/9. Newly heard murmur. Grade III/VI heart murmur, PU/PD, weight loss. Hx grain free diet.

Abnormal PE/Chem/CBC/UA Results: ALB 2.5; Glob 4.2; A/G ratio 0.6; BUN 86; Creat 4.5; SDMA 49.9; Amylase 2357; BP: ~120 mmHg. UA: 3+ protein, UPC 4.7; RBC 4-10; USG: 1.014

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	UE	~2.0	1.44	1.15	42.79	--	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	129	3.15	1.2	44.1	4.7	4.3	2.46

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. Left ventricular walls appear hyperechoic. 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 pulmonic valves have normal morphology and the corresponding outflow velocities are within normal limits. There is no evidence of pulmonic insufficiency. The aortic valve appears mildly irregular and there is elevated aortic outflow velocities consistent with aortic versus subaortic stenosis (mild). There is mild 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

- Mitral regurgitation.
- Normal left atrial size.
- Hyperechoic left ventricle.
- Mild aortic versus subaortic stenosis.
- Mild aortic insufficiency.

IMAGING PERFORMED BY

Shari Reffi CVT

HOSPITAL NAME

Andover Animal Hospital

REFERRING VET

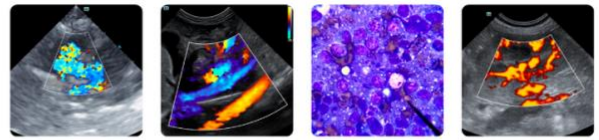
Dr. Alison Lawlor

INVOICE

15926

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05/07/26



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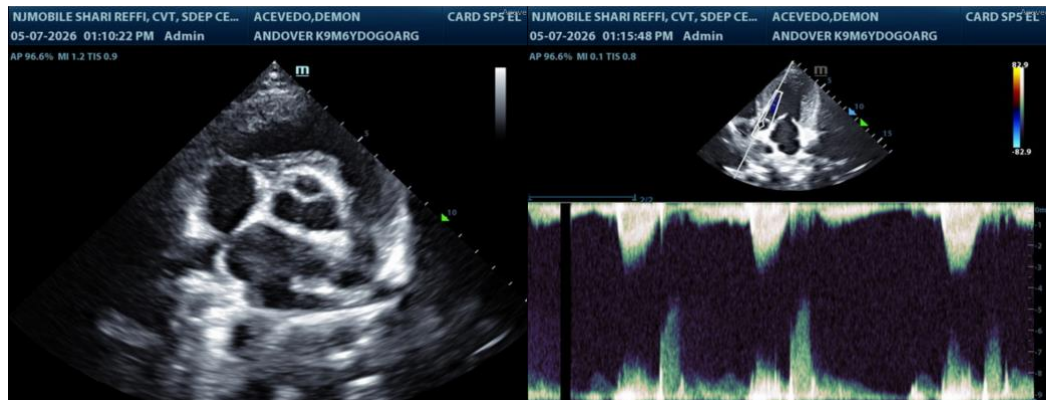
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The patient has changes to the aortic valve consistent with aortic versus subaortic stenosis. This is typically a congenital finding with a newly auscultated murmur, and the patient's elevated kidney values. I would recommend starting prophylactic antibiotics in case there is an infectious component. If there's a high degree of suspicion for endocarditis, I recommend obtaining blood cultures.

A discrete vegetative lesion is not identified on the images provided, but a negative echo cannot rule out endocarditis. Alternatively, it's possible that due to the patient's azotemia, they are volume underloaded, making the velocities spuriously increased. Either way, prophylactic antibiotic therapy is recommended with broad spectrum, i.e. Clavamox therapy, and obtaining a urine culture.

A recheck echo is recommended in six months, sooner if the patient is decompensating or the murmur is changing in intensity. Recommend ensuring the patient is not febrile.

The reported blood pressure is within normal limits. There is no contraindication to fluid therapy based upon the images provided.



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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