

PATIENT

Chloe Clayton

SPECIES

Canine

BREED

Mixed

SEX

Spayed Female

AGE

6 Years

WEIGHT

25.8 Pounds

INTERPRETED BY

Sara Brethel, DVM,
DACVIM (Cardiology)

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Animal Care Center

REFERRING VET

Dr. Caughlin

INVOICE

37318

DATE

6/3/26

PRESENTING CLINICAL SIGNS

Clinical Exam Findings: 5/22/26. G 3/4 dental calculus and moderate gingivitis, 1 lower incisor missing. G 3/6 systolic murmur and no arrhythmias noted on auscultation addison's- currently under treatment and well controlled.

ABNORMAL Labwork Values: 5/22/26- CBC: MCV 74.1 fL; NEU 12.07 K/ μ L, Chemistry: LIPA 3586 U/L For ECHO Only: Blood Pressure: Lateral BP size 3 with doppler - 170, 172,170,160, HR/RR/BP: 80/pant/168, Is there a Heart Murmur? If so, please grade: 3/6 systolic murmur. Current Medications: Prednisone 2.5 mg, Zycortal inj monthly. Notes to Specialist (if any): Please include if Pt is ok'd for anesthesia.

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	--	--	1.0	1.25	37.93	--	0.14
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	--	1.82	0.84	11.73	2.85	2.9	1.8

ECG Interpretation

Sinus rhythm with a sinus arrhythmia.

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 limits. There is no evidence of pulmonic or aortic insufficiency. The aorta appears normal. The



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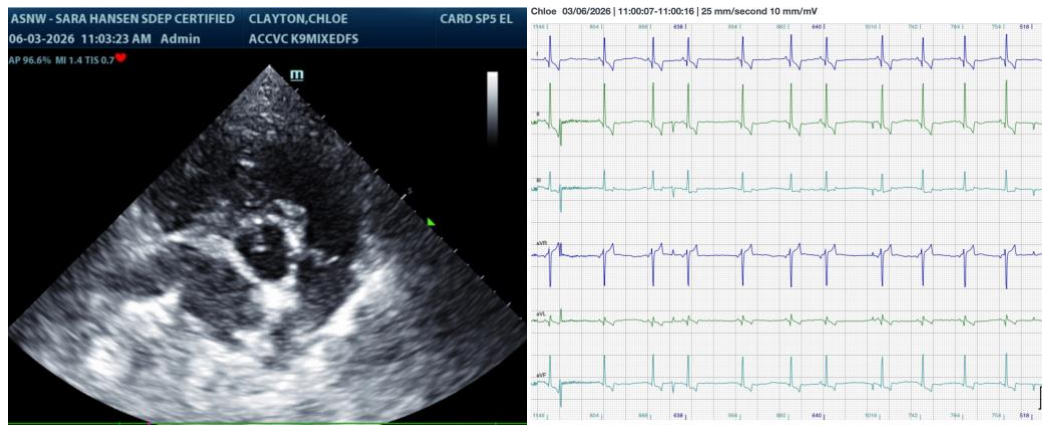
pulmonary artery and associated branches appear normal. There is no evidence of pleural effusion, pericardial effusion, or intracardiac masses.

ULTRASONOGRAPHIC FINDINGS

- Structurally normal heart

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The patient's heart appears to be structurally normal. A cause for the murmur is not identified. There is no contraindication to anesthesia. Given the history of the murmur, recommend avoiding certain medications. Standard perioperative fluid rates should be well-tolerated. Medications like dexmedetomidine and other alpha 2 agonists are best avoided. Ketamine is also best avoided. Anticholinergics can be used in the case of a clinically significant bradyarrhythmia (i.e., bradycardia with concurrent hypotension). If the patient is on an ACEi, recommend not giving this therapy the day of anesthesia. Given the history of a murmur as well, a recheck echo is recommended in a year, sooner if the murmur is changing or 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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