



PATIENT

Lola Griffin

PRESENTING CLINICAL SIGNS

Patient presents for persistent cough since October 2022. Current meds: theophylline, prednisone, and Baytril.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE HEART

BREED

Mixed Breed Canine

SEX

Spayed Female

AGE

12 Years

WEIGHT

74.1 Pounds

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.3	28-40	40-100	<0.6
PATIENT	NM	NM	1.1	1.2	30	58	0.4
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LA 2D short axis Base view (cm)	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	1.5	1.3	34	2.7	4.1	2.9

INTERPRETED BY

Tam Mengine, DVM, DABVP (canine/feline practice)

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Westwood Regional VH

REFERRING VET

Dr. George Cattiny

INVOICE

21464

DATE

3/6/23

Cardiac Presentation

The **left atrium** is of normal size with no evidence of smoke or thrombus formation. The **left ventricle** is normal in diameter with normal wall thickness and demonstrates good systolic function. The **right atrium** is subjectively of normal size and **right ventricle** dimensions and systolic function are subjectively normal. There is trivial **mitral valve** regurgitation and no **tricuspid valve** regurgitation noted. There was no evidence of chordae tendineae rupture or valvular prolapse in either valve and no vegetative lesions were seen. The **aortic** and **pulmonary valves** both exhibit normal appearance and function. The **main pulmonary artery** appears normal. There is no evidence of pulmonary hypertension. No pericardial/pleural effusion or cardiac masses are seen. There is no evidence of an arrhythmia.

ULTRASONOGRAPHIC FINDINGS

- Normal canine echocardiogram

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- There is no explanation for coughing on today's ultrasound, and no evidence of secondary pulmonary hypertension.
- Additional diagnostic considerations might include a Baermann fecal float, and an endotracheal wash for culture and cytology.
- There are no contraindications to anesthesia



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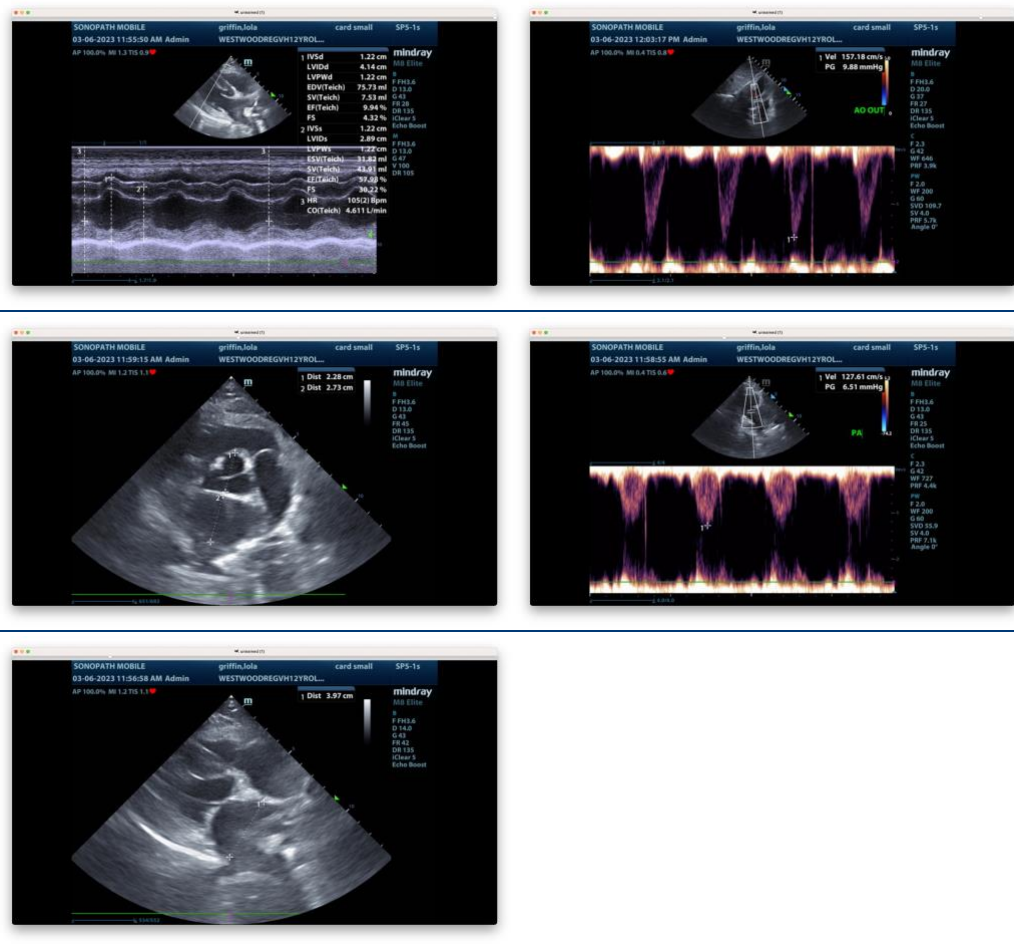
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Tam Mengine, DVM, DABVP (canine/feline practice)

info@SonoPath.com