


PRESENTING CLINICAL SIGNS
DATE History: Recheck degenerative valve disease. Grade 3/6 murmur.

1/12/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Kelly Vazquez

There is mild to moderate left atrial dilation. The mitral valve leaflets are thickened and exhibit mild systolic prolapse. A moderate jet of mitral regurgitation is present. There is mild left ventricular dilation. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve appears normal, though trace tricuspid regurgitation is present. The pulmonary artery and pulmonic valve appear normal, though trace pulmonic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

INTERPRETED BY

 Keith Blass, DVM,
 MS, DACVIM
 (Cardiology)

PATIENT

Max Echevarria

 LA - 30.4 mm
 LVIDd - 27.6 mm
 LVIDs - 12.3 mm
 FS - 55.4%
 LVOT - 1.59 m/s
 RVOT - 1.28 m/s
 TR - 3.20 m/s

SPECIES

Canine

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral valve disease

BREED

Terrier

This examination demonstrates some progression of Max's mitral valve disease over the past 7 months, as he now has moderate mitral regurgitation present, with mild to moderate secondary dilation of his left atrium and mild dilation of his left ventricle. Max's mitral valve disease still appears to be compensated, however, he could become at risk for the development of clinical signs, such as coughing, exercise intolerance, syncope, and labored breathing, if his disease were to progress much further.

SEX

I recommend starting Max on pimobendan (1.25 mg BID), as this medication should help to slow the progression of his mitral valve disease.

MN

A recheck echocardiogram is recommended in 9 months. Thoracic radiographs are recommended if Max experiences respiratory clinical signs.

AGE

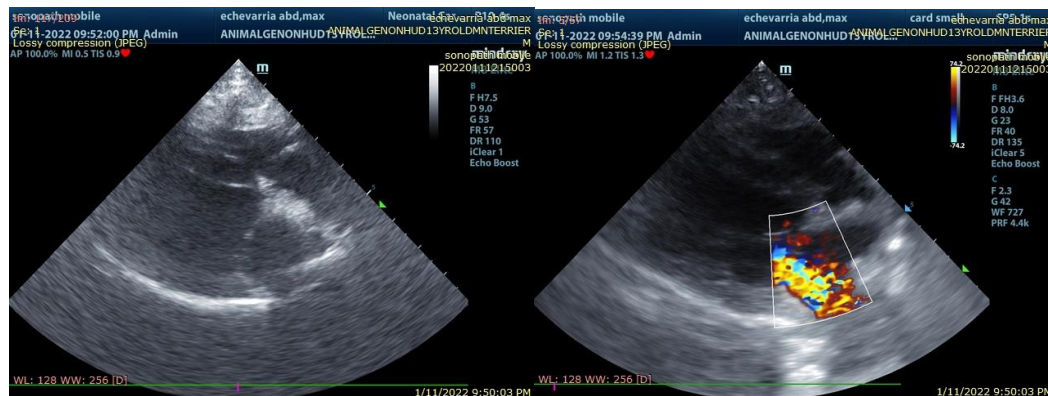
13 y

WEIGHT

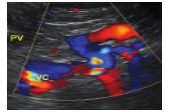
11.8 lb

HOSPITAL NAME

Animal General on Hudson


REFERRING VET

Dr. Ng



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

1/12/22

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.

PERFORMED BY:

Kelly Vazquez

Keith Blass, DVM, MS, DACVIM (Cardiology)
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631-804-5754

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PATIENT

Max Echevarria

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