



PRESENTING CLINICAL SIGNS

DATE History: Presented for inappetence for 3 days and refusal to walk. Radiographs showed pulmonary edema, so furosemide and Clavamox were started. Grade IV/VI murmur, pulmonary crackles.
1/12/22

ECHOCARDIOGRAPHIC FINDINGS

PERFORMED BY: 2D, M-mode, and Doppler study.
Dr. G. Ferrer
INTERPRETED BY There is mild to moderate left atrial dilation. The mitral valve leaflets are thickened and exhibit systolic prolapse. A moderate jet of mitral regurgitation is present. There is mild to moderate left ventricular dilation. Left ventricular systolic function is hyperdynamic. The aorta and aortic valve appear normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve appears normal. The pulmonary artery and pulmonic valve appear normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.
Keith Blass, DVM,
MS, DACVIM
(Cardiology)

ECG during echo: Sinus rhythm

PATIENT

Max Oquendo
Cardona

LA - 29.6 mm
LVIDd - 29.5 mm
LVIDs - 15.4 mm
FS - 47.8%
LVOT - 1.59 m/s
RVOT - 1.28 m/s
TR - 3.20 m/s

SPECIES

Canine

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral valve disease

BREED

Min. Schnauzer

This examination demonstrates moderate regurgitation of blood across Max's mitral valve resulting from degenerative valve disease. Secondary to his regurgitation, Max has mild to moderate dilation of both his left atrium and left ventricle, though his left ventricular systolic function is well-preserved. While I haven't seen Max's radiographs, his mitral valve disease is advanced enough to be able to result in the development of left-sided congestive heart failure, therefore, it's likely that this has occurred, especially if Max's clinical signs and pulmonary crackles improve with furosemide.

SEX

MN

I recommend starting Max on pimobendan (1.25 mg BID), as this medication should help to slow the progression of his mitral valve disease. If Max responds well to furosemide, continued use of the medication (12.5 mg BID) would be warranted, as would therapy with enalapril (2.5 mg BID).

AGE

14 y

Recheck radiographs and a renal/electrolyte profile are recommended in 1 week. A recheck echocardiogram is recommended in 9 months.

WEIGHT

11.4 lb

HOSPITAL NAME

Paseos VC

REFERRING VET

Dr. Martes



DATE

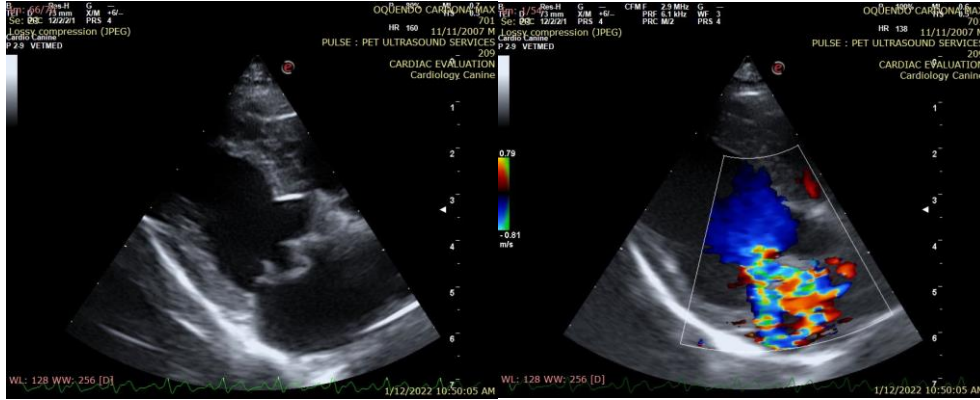
1/12/22

PERFORMED BY:

Dr. G. Ferrer

INTERPRETED BY

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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.

PATIENT

Max Oquendo
Cardona

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.

SPECIES

Canine

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631-804-5754

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