


PRESENTING CLINICAL SIGNS

History: Grade IV/VI murmur. Pre-anesthetic evaluation. Receiving pimobendan 2.5 mg BID, enalapril 5 mg BID, and spironolactone 12.5 mg BID.

DATE

1/26/23

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Shari Reffi, CVT

INTERPRETED BY

 Keith Blass, DVM,
 MS, DACVIM
 (Cardiology)

There is moderate left atrial dilation. The mitral valve leaflets are thickened and exhibit mild systolic prolapse. A moderate jet of eccentric mitral regurgitation is present. There is moderate 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 leaflets are mildly thickened, and a mild jet of tricuspid regurgitation is present. TR velocity is consistent with the presence of mild pulmonary hypertension (PG 43 mmHg). The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

PATIENT

Snoopy Cerqueria

LA - 38.0 mm
 LVIDd - 38.7 mm
 LVIDs - 18.1 mm
 FS - 53%
 RA - 25.0 mm
 LVOT - 1.41 m/s
 RVOT - 0.70 m/s
 TR - 3.29 m/s

SPECIES

Canine

ASSESSMENT/RECOMMENDATIONS

Degenerative mitral and tricuspid valve disease

BREED

Min. Pinscher

This examination demonstrates regurgitation of blood across Snoopy's mitral and tricuspid valves resulting from degenerative valve disease. Snoopy's tricuspid valve disease is mild, and appears to be well-compensated at this time. His mitral valve disease is more advanced, as Snoopy has moderate mitral regurgitation present, with moderate secondary dilation of both his left atrium and left ventricle, as well as mild secondary pulmonary hypertension. Snoopy's mitral valve disease is still compensated, however, its severity indicates that he is at risk for the development of clinical signs secondary to it, such as coughing, exercise intolerance, syncope, and labored breathing, therefore, careful monitoring for these signs is recommended.

SEX

MN

AGE

12 y

Snoopy's cardiovascular risk for general anesthesia is moderately increased based on this exam, therefore, precautions should be taken in order to minimize this risk. I recommend avoiding the use of alpha-2 agonists, ketamine, and telazol in the anesthetic protocol, reducing the IV fluid rate by 50%, and pre-oxygenating Snoopy for a few minutes prior to induction. If possible, monitoring of heart rhythm, blood pressure, and pulse oximetry are recommended during the procedure.

No change therapy is recommended based on this exam.

WEIGHT

24.24 lb

A recheck echocardiogram is recommended in 6 months. Thoracic radiographs are recommended if Snoopy experiences respiratory clinical signs.

HOSPITAL NAME

Basking Ridge AH

REFERRING VET

Dr. Hollo



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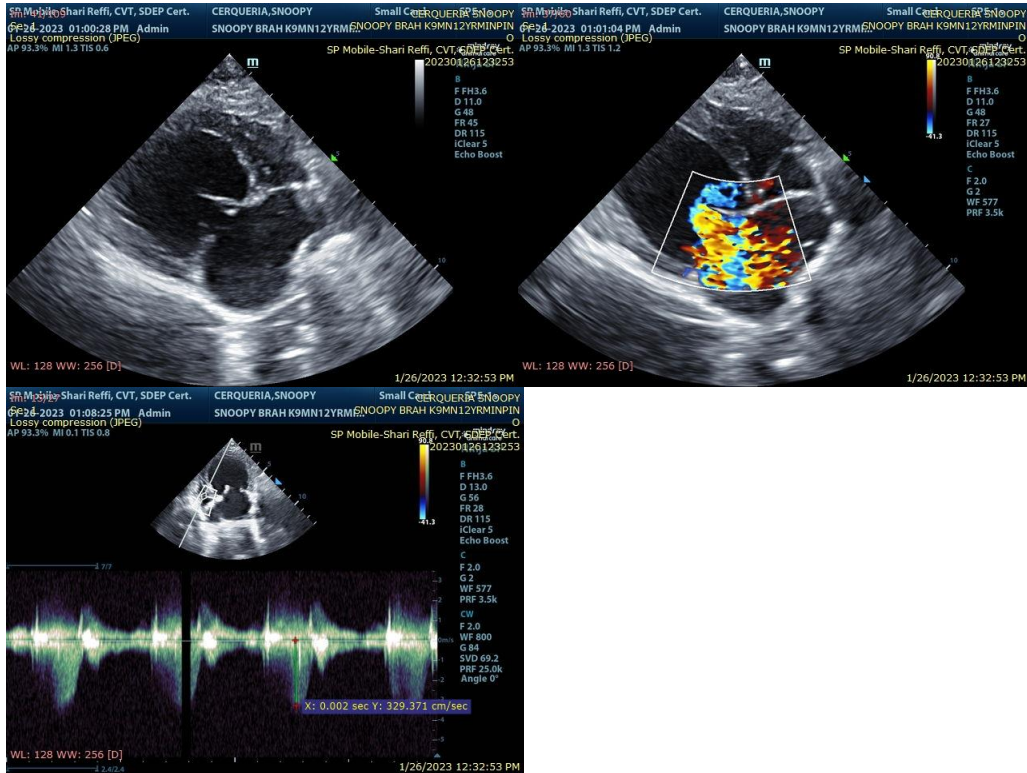
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Keith Blass, DVM, MS, DACVIM (Cardiology)
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