


PRESENTING CLINICAL SIGNS
DATE

History: Previously diagnosed with a mass originating from the right AV groove. Pericardiocentesis performed in 11/21 – hemorrhagic effusion. Receiving Metacam, Xue Fu Zhu Yu Tang, Yunnan Baiyao, Gui Pi Tang, Trixsyn, omega-3 supplement.

1/31/22

ECHOCARDIOGRAPHIC FINDINGS
PERFORMED BY:

2D, M-mode, and Doppler study.

Jenna Walsh, CVT

INTERPRETED BY

Left atrial size is normal. The mitral valve leaflets are very mildly thickened, and a very mild jet of mitral regurgitation is present. Left ventricular dimensions are normal. Left ventricular systolic function is normal. The aorta and aortic valve appear normal, though trace aortic insufficiency is present. There is mild right atrial and right ventricular dilation. The tricuspid valve appears normal, though trace tricuspid regurgitation is present. The pulmonary artery and pulmonic valve are normal. No shunting lesions are visualized. No pericardial effusion is present. There is an ~3.20 cm x 2.65 cm cavitated mass in the right AV groove.

 Keith Blass, DVM,
 MS, DACVIM
 (Cardiology)

PATIENT

 LA – 33.3 mm
 LVIDd – 36.7 mm
 LVIDs – 25.7 mm
 FS – 30%
 RA – 27.3 mm
 LVOT – 1.48 m/s
 RVOT – 0.75 m/s

Biscayne Gustafson

SPECIES

Canine

ELECTROCARDIOGRAPHIC FINDINGS

A single lead ECG is submitted for review.

BREED

 HR: 130 bpm
 Rhythm: Sinus with a VPC

Golden Retriever

The underlying rhythm is sinus in origin. All sinus complex amplitudes and intervals are within normal limits. A single VPC is present. No atrial ectopy or conduction blocks are seen.

SEX
ASSESSMENT/RECOMMENDATIONS
MN

 Right AV groove mass
 Degenerative mitral valve disease
 Ventricular premature complex (VPC)

AGE

13 y

Biscayne's echocardiogram demonstrates no change in the size or appearance of the mass in his right AV groove, nor does it demonstrate any progression of his degenerative mitral valve disease. No evidence of pericardial effusion is seen in today's exam, though careful monitoring for the development of clinical signs of cardiac tamponade (ex. lethargy, weakness, collapse, vomiting) is recommended.

WEIGHT

75 lb

A single VPC is seen in Biscayne's ECG, and the premature beat has likely developed secondary to his cardiac mass.

HOSPITAL NAME

Reevaluate for metastatic disease via thoracic radiography and/or abdominal ultrasonography is recommended if not performed in the past 3 months.

VCA McKenzie AH

As previously mentioned consideration can be given to chemotherapy and/or pericardiectomy as possible treatment options. No therapy is recommended for Biscayne's mitral valve disease or arrhythmia at this time.

REFERRING VET

Dr. Arpaia



A recheck echocardiogram and ECG are recommended in 4-6 months, sooner if clinical signs compatible with cardiac tamponade and/or an arrhythmia develop.

DATE

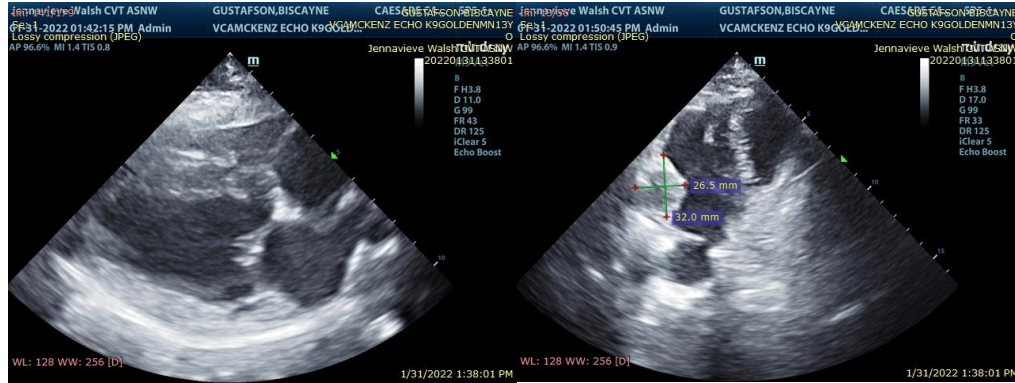
1/31/22

PERFORMED BY:

Jenna Walsh, CVT

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)



PATIENT

Biscayne Gustafson

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.

SPECIES

Canine

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631-804-5754

BREED

Golden Retriever

SEX

MN

AGE

13 y

WEIGHT

75 lb

HOSPITAL NAME

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REFERRING VET

Dr. Arpaia