
**PRESENTING CLINICAL SIGNS**

History: No murmur heard at 8 weeks of age. Presented 10/21 for vomiting and diarrhea, and a grade 3/6 murmur was auscultation, which is now grade 4/6.

**DATE**

1/6/22

**ECHOCARDIOGRAPHIC FINDINGS**

2D, M-mode, and Doppler study.

**PERFORMED BY:**

Kim Liedberg

**INTERPRETED BY**

 Keith Blass, DVM,  
 MS, DACVIM  
 (Cardiology)

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 wall thickness is normal. Left ventricular internal dimensions are normal. Left ventricular systolic function is normal. The subaortic region appears normal, however, there is turbulent flow originating in this region, the velocity of which is consistent with the presence of mild subaortic stenosis. The aorta and aortic valve appear normal, though mild aortic insufficiency is present. There is mild right atrial and right ventricular dilation. The tricuspid valve leaflets are mildly thickened, and a mild jet of tricuspid regurgitation is present. TR velocity does not suggest the presence of pulmonary hypertension. 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.

**PATIENT**

Zari Green

 LA - 33.6 mm  
 IVSd - 9.3 mm  
 LVPWd - 9.3 mm  
 LVIDd - 34.4 mm  
 LVIDs - 23.5 mm

**SPECIES**

Canine

 FS - 31.7%  
 RA - 27.6 mm  
 LVOT - 2.78 m/s  
 RVOT - 1.63 m/s

**BREED**

Rottweiler

**ASSESSMENT/RECOMMENDATIONS**

Subaortic stenosis (SAS)

**SEX**

FI

This examination demonstrates turbulent blood flow in Zari's left ventricular outflow tract/subaortic region, consistent with the presence of SAS. At present, Zari's stenosis is mild and hemodynamically negligible, however, the lesion of SAS can progress until a dog is fully grown, therefore, it's possible that her disease could worsen over the next few months. If this occurs, Zari could potentially become at risk for the development of clinical signs, such as exercise intolerance and syncope, as well as arrhythmia formation that could potentially result in sudden death.

**AGE**

5 mo

No therapy is recommended at this stage of Zari's SAS. As SAS is associated with an increased risk of developing aortic valve endocarditis, prophylactic antibiotic therapy is recommended any time there is the possibility of systemic bacteremia developing (ex. surgery, wound, dental procedure, infection).

**WEIGHT**

56 lb

A recheck echocardiogram is recommended in 7-9 months to monitor for disease progression, sooner if new clinical signs compatible with cardiac dysfunction develop.

**HOSPITAL NAME**

SVS Imaging WI

**REFERRING VET**

Dr. Wiegel



DATE

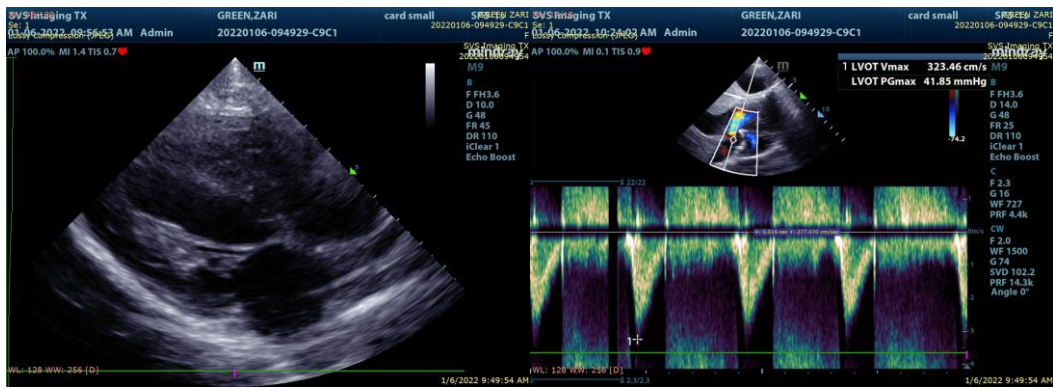
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

PATIENT

Zari Green

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)  
KeithBlass@gmail.com  
631-804-5754

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