



PATIENT

Sophie Bialmonte

SPECIES

Canine

BREED

French Bulldog

SEX

Female

AGE

4 months

WEIGHT

10.9lbs

INTERPRETED BY

Maggie Machen Lamy,
DVM, DACVIM
(Cardiology)

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

Byram Animal
Hospital

REFERRING VET

Dr. Abdul-Chani

INVOICE

26798

DATE

10/10/22

PRESENTING CLINICAL SIGNS

History: Historical grade 2/6 heart murmur, not appreciated on exam today. No clinical signs. No medications. Sedated with Butorphanol.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. Normal mitral valve leaflets with no obvious prolapse into the left atrial lumen. No mitral regurgitation. Normal left atrial dimension. Normal LV diameter with normal myocardial function. The LV wall thickness is normal. The tricuspid valve appears normal in form and function. No right atrial dilation. Normal right heart. Mild elevation of pulmonic outflow velocities, suspected to be at the level of the valve although the region is poorly visualized. The PV is suspected to be mildly thickened, although visualization is limited. No post-stenotic dilatation appreciated. Trace pulmonic insufficiency. The aortic valve appears to have normal morphology and mobility. Normal LVOT velocity. No pericardial or pleural effusion noted. No obvious cardiac masses.

CARDIAC CHART

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.6	28-40	40-100	<0.6
PATIENT	NA	NA	1.2	1.2	38	70	0.13
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LA 2D short axis Base view (cm)	LVIDd Avg; 2D and m-mode short axis (cm)	LVIDs Avg; 2D and m-mode short axis (cm)
NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6	BELOW	BELOW	BELOW	BELOW
PATIENT	116	1.4	2.2	4.9	1.3	1.9	1.2
*Normal chamber parameters expressed as a mean value (SD)				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
BODY WEIGHT DEPENDENT PARAMETERS				5	1.40 (4.5)	2.74 (5.2)	1.60 (4.7)
<i>*Note: All measurements based upon multi-modal images and methods. An average value is reported.</i>				10	1.50 (3.8)	3.27 (3.5)	2.06 (3.1)
				15	1.83 (2.0)	3.71 (2.4)	2.43 (2.1)
				20	2.02 (1.9)	4.14 (2.2)	2.80 (2.0)
				25	2.18 (2.4)	4.48 (2.9)	3.10 (2.5)
				30	2.33 (3.3)	4.83 (3.9)	3.39 (3.4)
				35	2.48 (4.3)	5.17 (5.0)	3.69 (4.5)
				40	2.62 (5.2)	5.48 (6.1)	3.96 (5.4)
				50	2.88 (7.1)	6.07 (8.3)	4.46 (7.4)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The only cause of the murmur identified is mildly elevated flow velocity through the pulmonary artery. A congenital valvular issue is suspected, although the region is poorly visualized. This breed is predisposed to this particular abnormality (and/or a coronary abnormality that can appear similar in presentation), although what is seen here does appear mild. It is important to note that congenital stenosis can worsen up to a year of age and careful monitoring is advised. No additional issues are noted. Highly recommend referral in this case for increased visualization, once 6 months old.



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Mild PS cases typically do not impact a patient clinically, and most are able to live a normal life free of complications. That being said, risk for progression to clinical signs will remain until 1 year of age and periodic monitoring is advised.

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Given mild disease there is certainly no indication of medications in a patient at this age range. Medical management with atenolol may be recommended in the future.

BREED

French Bulldog

Anesthetic risk is considered mildly elevated. **Avoid heart rate stimulating drugs such as atropine or glycopyrrolate.** Avoid excessive vasodilation/hypotension. Pre-oxygenate for 5-10 minutes prior to induction. A reasonable protocol would be as follows: premedicate with opioid/benzodiazepine, propofol or alfaxalone induction, isoflurane maintenance. Monitor ECG, BP as is standard. Monitor for hypoxia in recovery; utilize O2 chamber if needed. Mild IV fluid restriction is advised.

SEX

Female

AGE

4 months

Monitor for development of associated clinical signs (exertional collapse, abdominal distention, cough, labored breathing). Omega fatty acid supplementation may have some long-term benefit, given that these cases are predisposed to development of arrhythmias going forward. Breeding is not advised as this condition is genetically linked.

WEIGHT

10.9lbs

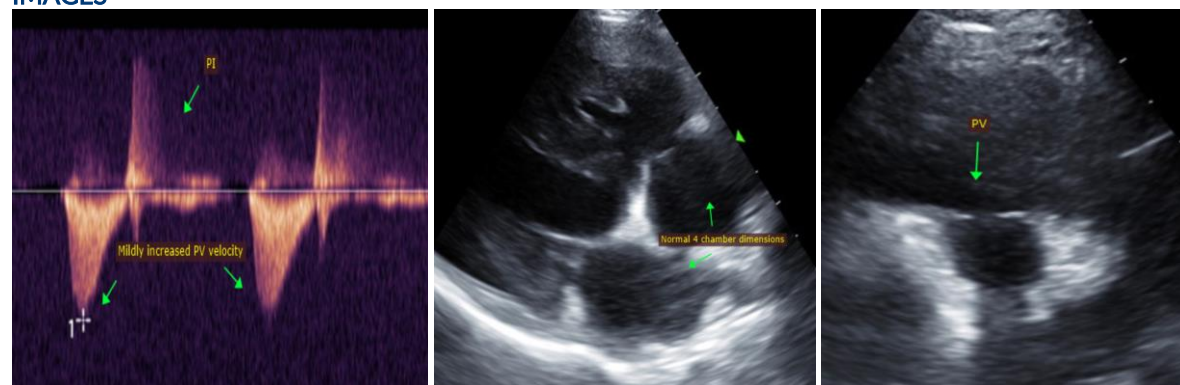
PLAN

Recommend recheck once 6-8 months of age (ideally with a local Cardiologist to discuss long term management).

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IMAGES



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Dr. Abdul-Chani

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.

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Thank you for this referral. This report was generated using transcription software, and minor dictation errors may be present. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance, please contact me.

DATE

10/10/22

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