



**RESENTING CLINICAL SIGNS**

History: Grade 4-5/6 left-sided murmur. Pre-anesthetic evaluation (dental).

**DATE**

10/14/21

**ECHOCARDIOGRAPHIC FINDINGS**

2D, M-mode, and Doppler study.

**PERFORMED BY:**

Dr. Garry Gotfredson

There is mild left atrial dilation. The mitral valve leaflets are mildly thickened, and there is Doppler evidence of mitral regurgitation present. There is mild left ventricular dilation. Left ventricular systolic function is normal. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve is normal. The pulmonary artery and pulmonic valve are normal. No pericardial effusion or cardiac masses are seen.

**INTERPRETED BY**

Keith Blass, DVM,  
MS, DACVIM  
(Cardiology)

LA - 31.1 mm  
LVIDd - 32.6 mm  
LVIDs - 23.1 mm  
FS - 29%  
RVOT - 1.00 m/s

**PATIENT**

Abby Roberts

**ASSESSMENT/RECOMMENDATIONS**

Degenerative mitral valve disease

**SPECIES**

Canine

This examination demonstrates regurgitation of blood across Abby's mitral valve resulting from degenerative valve disease. Secondary to her regurgitation, Abby has mild dilation of both her left atrium and left ventricle, though her left ventricular systolic function is normal. As only mild left heart chamber dilation is present, Abby's mitral valve disease appears to be well-compensated, and her current risk for the development of clinical signs secondary to it, such as coughing, exercise intolerance, syncope, and labored breathing, appears to be relatively low.

**BREED**

Terrier Mix

Abby's cardiovascular risk for general anesthesia is mildly increased based on this exam, therefore, some 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, as well as reducing the IV fluid rate by 25%. If possible, monitoring of heart rhythm, blood pressure, and pulse oximetry are recommended during the procedure.

**SEX**

FS

I recommend starting Abby on pimobendan (1.25 mg BID), as this medication should slow the progression of her mitral valve disease, as well as decrease her risk for general anesthesia.

**AGE**

9 y

A recheck (X-ray +/- echocardiogram) is recommended in 9 months, sooner if new clinical signs compatible with cardiac dysfunction develop.

**WEIGHT**

11 lb

**HOSPITAL NAME**

Red Hills VH



**REFERRING VET**

Dr. Montz



**DATE** 10/14/21 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.

**PERFORMED BY:** Dr. Garry Gotfredson 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.

**INTERPRETED BY** Keith Blass, DVM, MS, DACVIM (Cardiology)  
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Keith Blass, DVM,  
MS, DACVIM  
(Cardiology)

**PATIENT**

Abby Roberts

**SPECIES**

Canine

**BREED**

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