


PRESENTING CLINICAL SIGNS

DATE 10/17/22
 History: Presented to MVS on 10/14 for evaluation of pleural effusion. About 4 months ago, Tony stopped eating, lost weight, and defecated/urinated inside the house. He also had bright red gums, lethargy, labored breathing, and straining to defecate. Tony's symptoms with come and go with no apparent pattern. Thoracocentesis on 1-/14 removed 580 ml of yellow-orange opaque fluid from the right and 420 ml from the left. Fluid analysis consistent with chylothorax.

PERFORMED BY: ECHOCARDIOGRAPHIC FINDINGS
 2D, M-mode, and Doppler study.

Tom McNeill

INTERPRETED BY

 Keith Blass, DVM,
 MS, DACVIM
 (Cardiology)

Left atrial size is normal. The mitral valve is normal. Left ventricular dimensions are normal. There is borderline mild left ventricular systolic dysfunction. 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 shunting lesions are visualized. No heartworms are visualized. No pericardial effusion or cardiac masses are seen. Pleural effusion is present.

PATIENT
 Tony Larson
 LA - 29.8 mm
 LVIDd - 31.1 mm
 LVIDs - 23.3 mm
 FS - 25%
 RA - 21.3 mm
 LVOT - 0.46 m/s
 RVOT - 0.97 m/s

SPECIES

Canine

ASSESSMENT/RECOMMENDATIONS
BREED

Terrier Mix

SEX

MN

AGE

5 y

This examination demonstrates borderline mild depression of Tony's left ventricular systolic function. This could potentially represent a normal variant, however, the presence of mild myocardial dysfunction cannot be ruled out. If mild dysfunction is present, the hemodynamic effects of it appear to be mild, as Tony does not have secondary dilation of either of his left heart chambers. As such, his current risk for the development of clinical signs of left-sided cardiac dysfunction appears to be low. The absence of right heart dysfunction/chamber dilation in this exam indicates that right-sided congestive heart failure does not appear to be the cause of Tony's chylothorax. Other common causes of chylothorax include idiopathic thoracic duct leakage and neoplasia, therefore, these should be considered as possible causes.

Thoracic CT/lympangiography can be considered to further evaluate for possible causes of Tony's chylothorax.

Evaluation of Tony's diet is recommended, and a diet change would be warranted if he is receiving one that has been linked to the development of myocardial dysfunction in dogs (ex. grain-free, diets high in peas, lentils, beans, potatoes/sweet potatoes).

WEIGHT

12.2 kg

Repeat thoracocentesis may be warranted given the presence of pleural effusion in this exam. No cardiac therapy appears to be indicated at this time, though it's possible that diuretic therapy could be beneficial depending on the underlying cause of Tony's effusion.

HOSPITAL NAME

SVS Imaging CT

A focused recheck echocardiogram to reevaluate Tony's left ventricular systolic function is recommended in 3 months.

REFERRING VET

Dr. McDaniel



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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.

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