



**PATIENT**

Oakley Sexton

**PRESENTING CLINICAL SIGNS**

History: Initially presented 10/20/21 for GI upset, history noted heart murmur grade 2/6 January 2021 (14 months old).

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

Male Neutered

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and doppler imaging is available. Mild MV thickening with no prolapse into the left atrial lumen. Trace mitral regurgitation with no left atrial dilation. High normal LV diameter with adequate myocardial function. Normal LV wall dimensions with no obvious hypertrophy. The tricuspid valve appears normal with trace tricuspid regurgitation. Normal velocity. Normal right atrial and ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension. The pulmonic valve appears normal in morphology and mobility. Normal pulmonic outflow velocities with laminar flow. Mild thickening of the aortic valve; mildly increased LVOT velocity. Mild aortic insufficiency. Mild PI. No pericardial or pleural effusion noted. No obvious cardiac masses.

**CARDIAC CHART**

**AGE**

2 years

**WEIGHT**

70lbs

**INTERPRETED BY**

Maggie Machen Lamy, DVM, DACVIM (Cardiology)

**IMAGING PERFORMED BY**

Sarah Pender, CVT

**HOSPITAL NAME**

SVS Imaging QC

**REFERRING VET**

Dr. Case

**INVOICE**

21739

**DATE**

10/27/21

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	2.8	1.4	1.4	31	60	0.43
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	112	2.0	1.1	31.8	2.77	4.8	3.25
*Normal chamber parameters expressed as a mean value (SD)				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
<b>BODY WEIGHT DEPENDENT PARAMETERS</b>				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 cause of the murmur is suspected to be mild aortic stenosis due to a thickened aortic valve. No obvious subaortic ridge is visualized, although the LVOT is not extensively visualized. The velocity through the valve is borderline, and a mild under-estimation is suspected. Normal LV wall thickness indicates the disease is likely of minimal clinical significance and prognosis is good. A small aortic leak is identified, and a baseline BP is recommended every 6-12 months lifelong. The systolic function appears adequate; however, non-traditional diets should be avoided in this signalment going forward. Finally, there are trace mitral and tricuspid leaks present, which appear hemodynamically insignificant at this time. No additional issues are identified.

**IMAGING PERFORMED BY**

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**PATIENT**

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No cardiac medications are indicated at this time. From a cardiac standpoint, monitor for development of collapse episodes, labored breathing or exercise intolerance, as AS patients are more predisposed to development of arrhythmias than to CHF (particularly Boxers and Bulldogs).

**SPECIES**

Canine

Anesthetic risk is low. Avoid heart rate stimulating drugs such as atropine or glycopyrrolate unless clinically indicated. Recommend prophylactic antibiotics for any orthopedic or dental procedure in the future given slight predisposition to endocarditis.

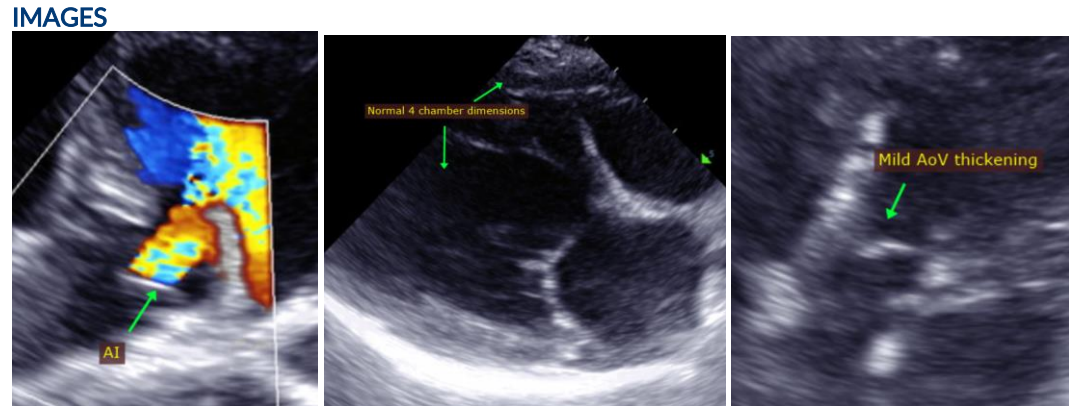
**BREED**

Golden Retriever

Recommend recheck echocardiogram in 1 year to confirm no progression is seen, and to screen for development of concurrent cardiac disease that the preexisting murmur may mask.

**SEX**

Male Neutered

**AGE**

2 years

**WEIGHT**

70lbs

**INTERPRETED BY**Maggie Machen Lamy,  
DVM, DACVIM  
(Cardiology)

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.

**IMAGING PERFORMED BY**

Sarah Pender, CVT

Maggie Machen Lamy, DVM  
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)  
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