



PRESENTING CLINICAL SIGNS

History: Grade 2-4/6 murmur. Echo in 2018 showed trivial MR. Experienced a seizure in May. Started on Keppra then, which has resulted in some improvement, though seizures still occur. Kidney values continue to increase. Urinary incontinence. Hiding more, not eating well, losing weight.

DATE

10/3/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Amy Mayhew, LVT

INTERPRETED BY

Keith Blass, DVM,
MS, DACVIM
(Cardiology)

Left atrial size is normal. The mitral valve appears normal, though trace mitral regurgitation is present. Left ventricular dimensions are normal. Left ventricular systolic function is hyperdynamic. 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 appear normal, though there is mildly increased flow velocity in the main pulmonary artery. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

PATIENT

Cali Broadrick

LA/Ao - 1.20
LVIDd - 20.9 mm
LVIDs - 10.6 mm
FS - 49%
LVOT - 1.49 m/s
RVOT - 1.60 m/s

SPECIES

Canine

BREED

Cockapoo

ASSESSMENT/RECOMMENDATIONS

This examination is similar to the one performed 4 years ago, and again shows trace regurgitation of blood across Cali's mitral valve. Cali's murmur is actually due to the presence of mildly increased flow velocity in her main pulmonary artery, which is a common reason for a functional/innocent murmur to develop in dogs.

No therapy is recommended based on this exam.

A recheck echocardiogram is recommended if the characteristics of Cali's murmur change, or if other new physical exam and/or clinical abnormalities suggestive of the presence of structural heart disease develop.

SEX

FS

AGE

14 y

WEIGHT

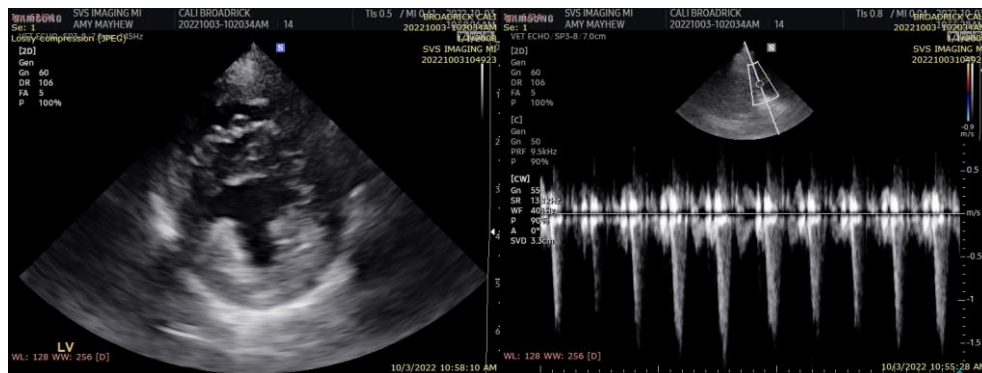
12 lb

HOSPITAL NAME

SVS Imaging MI

REFERRING VET

Union Lake VH





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.

DATE

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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.

PERFORMED BY:

Amy Mayhew, LVT

Keith Blass, DVM, MS, DACVIM (Cardiology)
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