



**PATIENT**

Rosie Roman

**SPECIES**

Canine

**BREED**

Boxer

**SEX**

Female Intact

**AGE**

1.5 years

**WEIGHT**

43lbs

**PRESENTING CLINICAL SIGNS**

History: Rosie referred to evaluate a heart murmur in July 2020. She is doing well with no C/S/V/D but is PU/PD. Eating well and remains active and playful. She needs to be spayed. CV/RESP: NSR, grade III/VI wheezy murmur with PMI over pulmonary area, PSS, lung fields clear. BP: 110-120mmHg. Sedated with propofol.

**ECHOCARDIOGRAM FINDINGS**

2D, m-mode, color flow and Doppler imaging is available.

**Left ventricle:** The LV diameter is normal with mildly depressed myocardial function. LV wall thicknesses are normal.

**Left atrium:** The left atrium is normal.

**Mitral valve:** The mitral valve is mildly thickened with no prolapse into the left atrial lumen. Trivial central mitral regurgitation.

**Aortic valve/Aorta:** The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity; laminar flow. No aortic insufficiency.

**Right ventricle:** Normal right ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension.

**Right atrium:** Normal RA dimension.

**Tricuspid valve:** The tricuspid valve appears normal with no tricuspid regurgitation.

**Pulmonic valve/Pulmonary artery:** The pulmonic valve is normal in morphology and mobility. No pulmonic insufficiency. Normal RVOT velocity; laminar flow.

**Pericardium/other:** No pericardial or pleural effusion noted. No obvious cardiac masses.

**Heart rhythm:** ECG reveals a sinus rhythm with an average HR of 100bpm.

**INTERPRETED BY**

Maggie Machen  
Lamy, DVM  
DACVIM (Cardiology)

**2-Dimensional Measurements**

Ao diam (cm)	1.9
LA diam (cm)	2.4
LA:Ao (Swe)	1.2
IVS thickness (cm)	1.0
LVID diastole (cm)	3.6
PW thickness (cm)	1.1
LVID systole (cm)	2.6
FS (%)	27

**Doppler Measurements**

PV Vmax (m/s)	0.8
AoV Vmax (m/s)	1.6
MR Vmax (m/s)	NA
TR Vmax (m/s)	NA
TR PG (mmHg)	NA

**IMAGING  
PERFORMED BY**

Pamela Harrigan,  
RDCS

**INTERPRETATION OF THE FINDINGS**

Overtly normal cardiac structure with mildly depressed myocardial function likely due to heavy sedation. No obvious cause of the murmur is identified in this study, which may be due to heavy sedation. Suspicion is high for a flow murmur through the aortic root based upon borderline velocities despite sedation. This is a benign flow abnormality only present with elevated heart rates. Other small flow abnormalities cannot be entirely ruled out; however, suspicion is low. No obvious congenital defects are visualized.

**HOSPITAL NAME**

Mass Veterinary  
Specialty Services

**REFERRING VET**

Dr. Masloski

**RECOMMENDATIONS**

- No cardiac medications are indicated at this time.
- Monitor for any development of cough, labored breathing or exercise intolerance.
- No cardiac contraindication for general anesthesia.

**INVOICE**

21349

**DATE**

10/5/21



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**PLAN**

- Recommend recheck echocardiogram in 12-18 months to screen for progression or development of concurrent cardiac disease that the preexisting murmur may mask.

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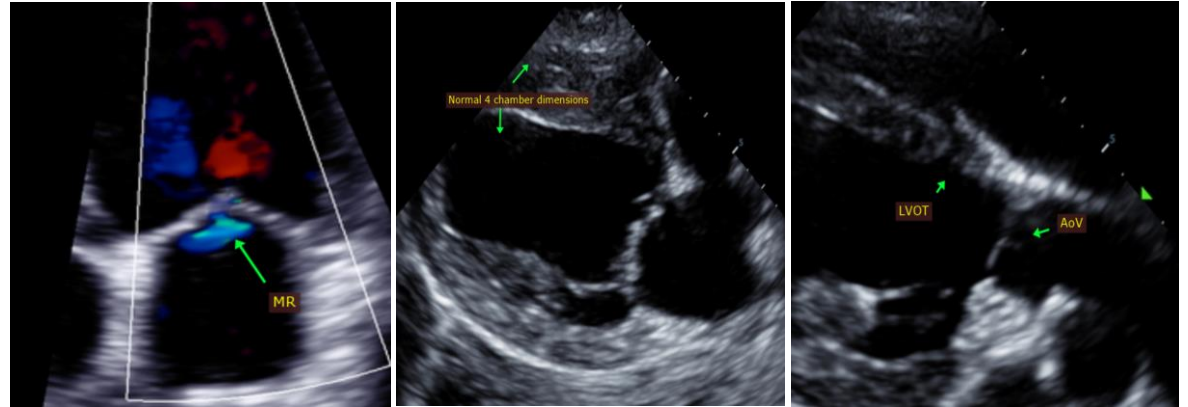
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**IMAGES**



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. 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.

**Maggie Machen Lamy, DVM**  
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**Echocardiogram performed by:** Pamela Harrigan, RDCS  
Pet Animal Ultrasound Service (4paus.com)

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RDCS

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