



PATIENT

Gizmo Haniuk

PRESENTING CLINICAL SIGNS

History: Heart murmur, no obvious arrhythmia. Recently having episodes of coughing associated with excitement and barking followed by collapse and body rigidity. Recently had a collapse on his bed.

SPECIES

Canine

-Current medications: History of skin allergies so has been on Convenia and Cytopoint, Topagen.

BREED

Maltese

SEX

Male Neutered

AGE

11 years

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and doppler imaging is available. Diffuse thickening of mitral valve leaflets (anterior>posterior) with mild prolapse into the left atrial lumen. Moderate eccentric mitral regurgitation with moderate left atrial dilation. Normal MR velocity. Mild LV dilation with hyperdynamic myocardial function. The tricuspid valve appears subjectively normal, with mild tricuspid regurgitation. Normal velocity. Normal right atrial and ventricular diameter. The pulmonic and aortic valves are normal in morphology and mobility. Normal pulmonic and aortic outflow velocities. No aortic or pulmonic insufficiency. No pericardial or pleural effusion noted. No cardiac tumors observed.

CARDIAC CHART

WEIGHT

14.2lbs

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	4.5	2.1	NM	1.8	58	90	0.2
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	81	1.2	1.0	6.4	2.1	3.1	1.5
*Normal chamber parameters expressed as a mean value (SD)				3	1.27 (5.3)	2.46 (2.46)	1.36 (5.5)
BODY WEIGHT DEPENDENT PARAMETERS				5	1.40 (4.5)	2.74 (5.2)	1.60 (4.7)
*Note: All measurements based upon multi-modal images and methods. An average value is reported.				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)

INTERPRETED BY

Maggie Machen Lamy,
DVM DACVIM
(Cardiology)

IMAGING PERFORMED BY

Crystal Hill, RVT

HOSPITAL NAME

The Maples Animal
Hospital

REFERRING VET

Dr. Kazienko

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Chronic degenerative valve disease causing moderate mitral and mild tricuspid regurgitation. Moderate left atrial enlargement indicates there is relatively low risk for imminent complication, however risk for progression to spontaneous congestive heart failure in the future is elevated. No additional issues are identified.

INVOICE

21402

DATE

10/6/21



PATIENT

Gizmo Haniuk

Given the risk for progression and results of the EPIC trial, reasonable to continue Pimobendan in this patient as below (slightly lower dose based upon patient's small body weight). Assessment of progression in the future will help predict long term outcome; however, prognosis is guarded at this stage (B2).

SPECIES

Canine

No definitive cardiac cause for the episodes is seen in this study (i.e., no PAH, no obvious rupture or tears, reasonable cardiac output, etc.) and other causes should be considered.

BREED

Maltese

These possible causes include vasovagal events, intermittent arrhythmias, neurologic/systemic issues, etc. That being said, if the episodes are occurring with significant exertion there certainly is a possibility that regurgitant volume is involved and Pimobendan may help. A baseline BP should be obtained. An intermittent arrhythmia cannot be ruled out without a Holter monitor, and this should be considered if episodes continue undiagnosed. Further systemic evaluation may also be considered including AUS. Finally, atypical seizures should also be considered, pending more extensive history/situational nature of the episodes.

SEX

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Omega fatty acid supplementation and mild salt restriction may also be of some long-term benefit. Monitor for development of a progressive cough, labored breathing, exercise intolerance or collapse episodes.

WEIGHT

14.2lbs

Once on the medication for 3-5 days, anesthetic risk is considered mildly elevated. Cardiac protective drug choices (opioid/benzodiazepine premedication, Propofol or alfaxalone induction, iso or sevo gas) are recommended. Monitor for arrhythmias, hypotension, and hypoxia both intra and post-operatively and intervene as necessary. Judicious IV fluid rates are recommended to avoid fluid overload. Avoid heart rate stimulating drugs such as atropine unless clinically indicated.

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DVM DACVIM
(Cardiology)

PLAN

Baseline BP recommended. Administer heart muscle support Pimobendan 0.3mg/kg PO q12h. Consider hydrocodone if needed for cough suppression.

IMAGING PERFORMED BY

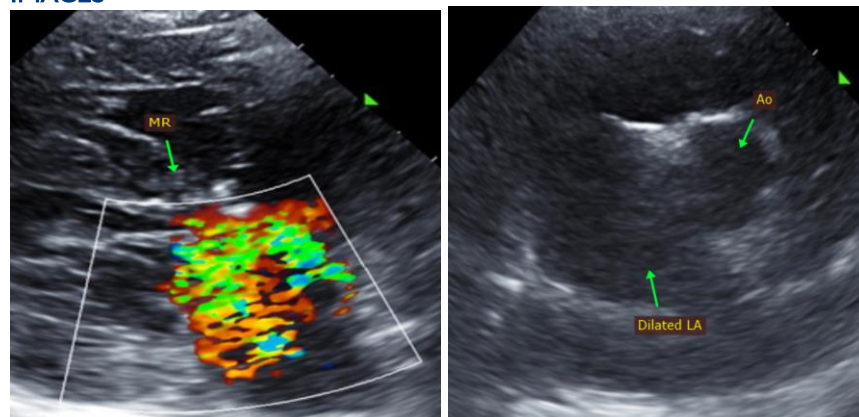
Crystal Hill, RVT

Recommend monitor for progression with a recheck echocardiogram in 6 months, sooner if any development of clinical signs.

IMAGES

HOSPITAL NAME

The Maples Animal Hospital



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Dr. Kazienko

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PATIENT

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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.

SPECIES

Canine

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.

BREED

Maltese

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

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AGE

11 years

WEIGHT

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