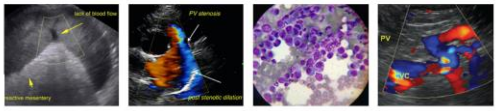
Mass Veterinary Specialty Services
1-413-734-1292



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT
Rosie Peace, Love and Poms

SPECIES
Canine

BREED
Pomeranian

SEX
Female Intact

AGE
15 years

WEIGHT
6.31lbs

INTERPRETED BY
Maggie Machen Lamy, DVM DACVIM (Cardiology)

IMAGING PERFORMED BY
Pamela Harrigan, RDCS

HOSPITAL NAME
Mass Veterinary Specialty Services

REFERRING VET
Dr. Masloski

INVOICE
21379

DATE
10/6/21

PRESENTING CLINICAL SIGNS

History: Rosie is currently in foster care. She is a rescue from PA. She is in need of dental work (severe dental disease present). She was initially seen by a veterinarian in April when a murmur was noted, and medications started. Cough noted, which improves with guafensin. Her appetite tends to wax and wane. CV/RESP: NSR, grade IV/VI murmur with PMI left apical area radiating to right, PSS, lung fields clear. BP: 110mmHg.
-Current medications: 1) Pimobendan/vetmedin 1.25mg 1 tab in am 1/2 tab in pm 2) Lasix/furosemide 12.5mg 1/2 tab in am 1/4 tab in pm 3) Guafensin tabs 10mg twice a day 4) Gabapentin 50mg 1 capsule twice a day 5) Tobramycin OU twice a day 6) Ofloxacin OU twice a day *Sedated with propofol for study.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and Doppler imaging is available.
Left ventricle: Mild LV dilation with hyperdynamic function. LV wall thicknesses are normal.
Left atrium: The left atrium is moderately dilated.
Mitral valve: The mitral valve is diffusely thickened with significant prolapse into the left atrial lumen. Moderate to severe eccentric mitral regurgitation with a normal velocity.
Aortic valve/Aorta: The aortic valve is mildly thickened. Normal aortic outflow velocity; laminar flow. Mild 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 mildly thickened with mild tricuspid regurgitation. Normal velocity.
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 160bpm.

2-Dimensional Measurements

Ao diam (cm)	1.2
LA diam (cm)	2.2
LA:Ao (Swe)	1.8
IVS thickness (cm)	0.6
LVID diastole (cm)	2.3
PW thickness (cm)	0.6
LVID systole (cm)	1.3
FS (%)	46

Doppler Measurements

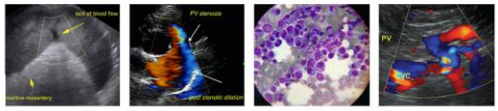
PV Vmax (m/s)	0.44
AoV Vmax (m/s)	1.6
MR Vmax (m/s)	4.3
TR Vmax (m/s)	2.3
TR PG (mmHg)	22

INTERPRETATION OF THE FINDINGS

Chronic degenerative valve disease causing moderate to severe 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. A small aortic leak is noted; however, reported blood pressures are low. No additional issues are identified.

Given these findings, Pimobendan is certainly recommended as below. In the absence of documented CHF, Lasix is not indicated and can be discontinued. Assessment of progression in the future will help predict long term outcome, however prognosis is guarded at this stage (B2).

Mass Veterinary Specialty Services
1-413-734-1292



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT

Rosie Peace, Love and Poms

SPECIES

Canine

BREED

Pomeranian

SEX

Female Intact

AGE

15 years

WEIGHT

6.31lbs

INTERPRETED BY

Maggie Machen Lamy, DVM DACVIM (Cardiology)

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

Mass Veterinary Specialty Services

REFERRING VET

Dr. Masloski

INVOICE

21379

DATE

10/6/21

The cough is suspected to be due to a combination of mainstem bronchi compression and potentially airway disease in this predisposed breed. Screening CXR, hydrocodone, etc. may be useful.

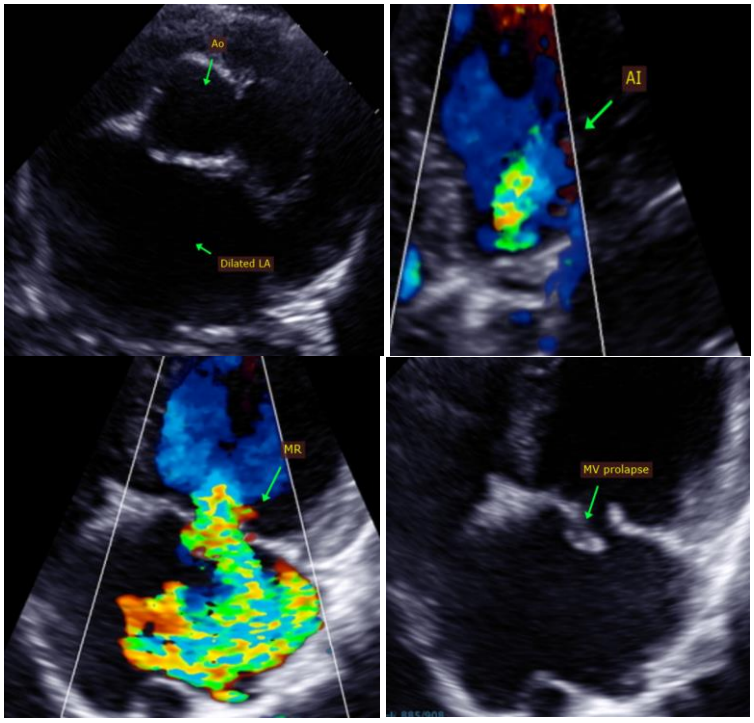
RECOMMENDATIONS

- Continue Pimobendan 0.3mg/kg PO q12h.
- No obvious indication for Lasix unless CHF has been documented previously.
- Monitor BP every 6 months with institution of an ACE-I if consistently >150mmHg.
- Consider CXR, hydrocodone, etc. as discussed.
- Omega fatty acid supplementation and mild salt restriction may be of some long-term benefit.
- Anesthetic risk is considered mild if needed. Cardiac protective drug choices (opioid/benzodiazepine premedication, propofol or alfaxalone induction, isoflurane gas) are recommended. Pre-oxygenate for 5-10 minutes prior to induction. Monitor for arrhythmias, hypotension, and hypoxia both intra and post-operatively and intervene as necessary. Mild IV fluid restriction is recommended to avoid fluid overload. Avoid heart rate stimulating drugs such as atropine unless clinically indicated.
- Monitor for development of a cough, labored breathing, exercise intolerance or collapse episodes.

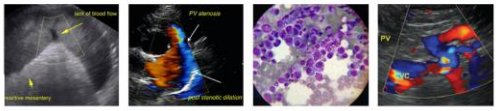
PLAN

- Recommend conservative monitoring with a recheck echocardiogram in 6 months, sooner if any development of clinical signs.

IMAGES



Mass Veterinary Specialty Services
1-413-734-1292



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT
Rosie Peace, Love and Poms

SPECIES
Canine

BREED
Pomeranian

SEX
Female Intact

AGE
15 years

WEIGHT
6.31lbs

INTERPRETED BY
Maggie Machen Lamy, DVM DACVIM (Cardiology)

IMAGING PERFORMED BY
Pamela Harrigan, RDCS

HOSPITAL NAME
Mass Veterinary Specialty Services

REFERRING VET
Dr. Masloski

INVOICE
21379

DATE
10/6/21

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
Diplomate of the American College of Veterinary Internal Medicine (Cardiology)
info@sonopath.com

Echocardiogram performed by: Pamela Harrigan, RDCS
Pet Animal Ultrasound Service (4paus.com)